

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35276

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: PRENT CORPORATION

## Current Principal Place of Business:

2225 KENNEDY ROAD  
JANESVILLE, WI 53545

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 471  
JANESVILLE, WI 535470471

## New Mailing Address:

FEI Number: 39-1082406

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VAN WINKLE, MARY E.  
2815 PROCTOR ROAD  
SARASOTA, FL 34231 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PREGONT, JOSEPH T.  
Address: 444 OAK ROAD  
City-St-Zip: JANESVILLE, WI 53545

Title: D ( ) Delete  
Name: JOHNSON, ANN  
Address: 2604 CHEROKEE ROAD  
City-St-Zip: JANESVILLE, WI 53545

Title: SD ( ) Delete  
Name: PREGONT, CAROL M.  
Address: 3547 FAIROAKS LANE  
City-St-Zip: LONG BOAT KEY, FL 34228

Title: VP ( ) Delete  
Name: WALKER, WALTER  
Address: 1937 EASTWOOD  
City-St-Zip: JANESVILLE, WI 53545

Title: VP ( ) Delete  
Name: LEMKE, SARA  
Address: 118 S. HARMONY DRIVE  
City-St-Zip: JANESVILLE, WI 53545

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: WALKER, WALTER  
Address: 4451 RED OAK DRIVE  
City-St-Zip: JANESVILLE, WI 53546

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARA LEMKE

VP

01/05/2007

Electronic Signature of Signing Officer or Director

Date