

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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98 MAR 31 PM 12:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE.

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000049349 (8)

1. Corporation Name

CENTRES GROUP EAGAN GP, INC.

Principal Place of Business

C/O CENTRES, INC.
3315 N 124TH STREET SUITE E
BROOKFIELD WI 53005

Mailing Address

C/O CENTRES, INC.
3315 N 124TH STREET SUITE E
BROOKFIELD WI 53005

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified

06/02/1997

4. FEI Number

39-1908119

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SPARKMAN, KENDALL
200 S BISCAYNE BLVD
SUITE 2500
MIAMI FL 33131-2336

10. Name and Address of New Registered Agent

81 Name
Kenneth B. Karl
82 Street Address (P.O. Box Number is Not Acceptable)
Two Dattran Center, Ste. 1528
83
9130 South Dadeland Blvd.
84 City
Miami
85 Zip Code
FL 33156

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Michelle M. Nennig - Vice President

3-30-98

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE	D
NAME	KARL, KENNETH B
STREET ADDRESS	1390 S DIXIE HWY STE 1304
CITY-ST-ZIP	CORAL GABLES FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE	
1.2 NAME	9130 South Dadeland Blvd.
1.3 STREET ADDRESS	Miami, FL 33156
1.4 CITY-ST-ZIP	
2.1 TITLE	Vice President-Treas., Sec. <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Michelle M. Nennig
2.3 STREET ADDRESS	3314 N. 124th Street - Ste. E
2.4 CITY-ST-ZIP	Brookfield, WI 53005
3.1 TITLE	
3.2 NAME	500002478415--4
3.3 STREET ADDRESS	-04/03/98--01080--014
3.4 CITY-ST-ZIP	****158.75 ****158.75
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Michelle M. Nennig-Vice President 3-30-98 - 414-781-8760

CR2E034 (10/97)