


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2006 8:00 am
Secretary of State

03-02-2006 90010 018 ***150.00

DOCUMENT # P97000077897 1. Entity Name TOWNE DEVELOPMENT OF GULF SHORES, INC.					
Principal Place of Business 8430 ENTERPRISE CIRCLE SUITE 130 BRADENTON, FL 34202			Mailing Address 710 NORTH PLANKINTON AVENUE SUITE 1200 MILWAUKEE, WI 53203		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Zip		Country	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				4. FEI Number 39-1906835	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV STEIN, GERALD M 710 N. PLANKINTON AVE., # 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRV JANZ, JAMES F 710 N. PLANKINTON AVE, #1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FV BRAUN, ROBERT E 710 N PLANKINTON AVE, SUITE 1000 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T CHEVALIER, STEPHAN J 710 N. PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S YOUNG, JAMES B 710 N. PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BORRIS, JAMES D 710 N PLANKINTON AVE #1100 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Mark S. Madigan, Vice President 02/16/06 414-274-2433 <small>Date Daytime Phone #</small>		

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02012006 Chg-P CR2E034 (11/05)

4. FEI Number 39-1906835 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	EV	<input type="checkbox"/> Delete
NAME	STEIN, GERALD M	
STREET ADDRESS	710 N. PLANKINTON AVE., # 1200	
CITY-ST-ZIP	MILWAUKEE, WI 53203	
TITLE	SRV	<input type="checkbox"/> Delete
NAME	JANZ, JAMES F	
STREET ADDRESS	710 N. PLANKINTON AVE, #1200	
CITY-ST-ZIP	MILWAUKEE, WI 53203	
TITLE	FV	<input type="checkbox"/> Delete
NAME	BRAUN, ROBERT E	
STREET ADDRESS	710 N PLANKINTON AVE, SUITE 1000	
CITY-ST-ZIP	MILWAUKEE, WI 53203	
TITLE	V/T	<input type="checkbox"/> Delete
NAME	CHEVALIER, STEPHAN J	
STREET ADDRESS	710 N. PLANKINTON AVENUE, #1200	
CITY-ST-ZIP	MILWAUKEE, WI 53203	
TITLE	V/S	<input type="checkbox"/> Delete
NAME	YOUNG, JAMES B	
STREET ADDRESS	710 N. PLANKINTON AVENUE, #1200	
CITY-ST-ZIP	MILWAUKEE, WI 53203	
TITLE	V	<input type="checkbox"/> Delete
NAME	BORRIS, JAMES D	
STREET ADDRESS	710 N PLANKINTON AVE #1100	
CITY-ST-ZIP	MILWAUKEE, WI 53203	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEE ATTACHED LIST FOR ADDITIONAL OFFICERS	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Mark S. Madigan, Vice President 02/16/06 414-274-2433
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40022683

TOWNE DEVELOPMENT OF GULF SHORES, INC.

DOCUMENT #P97000077897

Additional Directors/Officers:

D

ZILBER, JOSEPH J.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

P

WIGCHERS, ARTHUR W.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

V

GRANDLICH, JOHN R.
710 N. PLANKINTON AVE., SUITE #1100
MILWAUKEE, WI 53203

V

KEARNEY, KITT E R.
8430 ENTERPRISE CIRCLE, SUITE #130
BRADENTON, FL 34202

V/AS

MADIGAN, MARK S.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

AS

BENNETT, BRENDA C.
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

AS

DeLISLE, SANDRA J.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203