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

PROFIT *CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000101945 (8)

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

CENTRES LAMAR GP, INC.			The state of the s	
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Principal Place of Business	Mailing Address		T I DOUGHOUSE FIN CRITE COULD NOTE BRIEF DUISD 1/8/0 8/	0101 11919 19111 B167 3 11 1891
%CENTRES. INC.	*CENTRES. INC.			
3315 N 124TH ST.SUITE E 3315 N 124TH ST.SUITE E			DO NOT WRITE IN THIS	SPACE
BROOKFIELD WI \$3005	BROOKFIELD WI 53005		3. Date Incorporated or Qualified	STACE
			11/26/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		39-1915091	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the co	
24 25	29 3	0]		∐ Yes ∐ No
g, Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered	Agent
SPARKMAN, KENDALL			Kenneth B. Karl	
200 \$ BISCAYNE BLVD		82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 2500		63	Two Datran Center, Ste. 1528	
MIAM) FL 33131-2336			9130 South Dadeland Blvd.	
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes	the above-named co	1 1 <u>E</u> C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>- </u>
office or registered agents or both, in the State	of Florida, Such change was auf	fhorized by the corpo	ration's board of directors. I hereby accept the ap	pointment as registered
agent. I am tamiliar with, and accept the obliga	j			
SIGNATURE Signature, typed or printed name of registered age	Michelle M. Nenni	LG - Vice Pr Registered Agent signature re	resident 3-30-98	}
12. OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE		Change Addition
NAME KARL, KENNETH B		1,2 NAME	9130 South Dadeland H	Blvd.
STREET ADDRESS 9130 S DADELAND BLVD, SUITE 1528		1.3 STREET ADDRESS	Miami, FL 33156	J;
CITY-ST-ZIP MIAMI FL 33158		1.4 CiTY - ST - ZiP		
TITLE	☐ DELETE	2.1 TITLE	lice President-Treas., Sec.	Change Addition
NAME		2.2 NAME 1	Michelle M. Nennig	}
STREET ADDRESS		2.3 STREET ADDRESS	3314 N. 124th Street - Suit	e E
CITY-ST-ZIP	T Dri Svr	2.4 CITY-ST-ZIP	Brookfield, WI 53005	
THILE	☐ DELETE	3.1 TILLE	·	Change Addition
NAME		3.2 NAME	4000,02,4,78	<u> 4247 </u>
STREET ADDRESS		3.3 STREET ADDRESS	-04/03/980	
TITLE	DELETE	3.4. C(TY - ST - ZIP 4.1 T(TLF	****158.75	****158.75 ☐ Change ☐ Addition
NAME	(DELLE			FT Auguste FT WOOMING
STREET ADDRESS		4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		L Change L JAGREDIE
STREET ADDRESS		5.3 STREET ADDRESS	() (II and	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Ville	,
TITLE	☐ DELETE	61 TITLE	Q. War 3/31/98	Change Addition
NAME		62 NAME	7/1/10	
STREET ADDRESS		6.3 STREET ADDRESS	. (
CITY-ST-7IP		B 4 CITY - ST - ZIP		

14. Thereby 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.

Michelle M. Nennig – Vice President 3–30–98 – 414–781–876

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