

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

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90191 050 \*\*\*150.00

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P98000068828**

1. Corporation Name  
**TOWNE DEVELOPMENT OF UNIVERSITY PARKWAY, INC.**



Principal Place of Business      Mailing Address  
**710 N PLANKINTON AVE. SUITE 1200**      **710 N PLANKINTON AVE. SUITE 1200**  
**MILWAUKEE WI 53203**      **MILWAUKEE WI 53203**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**08/06/1998**

4. FEI Number      Applied For  
**39-1937329**       Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax.       Yes       No

2. Principal Place of Business      2a. Mailing Address

21 Suite, Apt. #, etc.      26 Suite, Apt. #, etc.

22 City & State      27 City & State

23 Zip      Country      28 Zip      Country

24      25      29      30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City      FL      85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>ZILBER, JOSEPH J</b>
STREET ADDRESS	<b>710 N PLANKINTON AVE</b>
CITY-ST-ZIP	<b>MILWAUKEE WI 53203</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change       Addition

**SEE ATTACHED LIST FOR ADDITIONAL OFFICERS**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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, with all other like empowered.

SIGNATURE: \_\_\_\_\_ **REQUIRED**

Mark S. Madigan  
 Assistant Secretary 1/18/99 (414) 274-2433

CR2E034 (1/198)

535382-90191-50  
P98000068828

TOWNE DEVELOPMENT OF UNIVERSITY PARKWAY, INC.  
DOCUMENT NO. P98000068828

OFFICERS:

P  
WIGCHERS, ARTHUR W., JR.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V  
BORRIS, JAMES D.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V  
BRAUN, ROBERT E.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V  
GRANDLICH, JOHN R.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V  
JANZ, JAMES F.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V  
STEIN, GERALD  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V/S  
YOUNG, JAMES B.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

TR  
CHEVALIER, STEPHAN J.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

AS  
DELISLE, SANDRA J.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

AS  
MADIGAN, MARK S.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203