


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90006 042 \*\*\*150.00

<b>DOCUMENT # P99000016424</b>	
1. Entity Name TOWNE DEVELOPMENT OF INDIAN HARBOR, INC.	

Principal Place of Business 1000 SHOREWOOD DRIVE SUITE 200 CAPE CANAVERAL, FL 32920	Mailing Address 710 N. PLANKINTON AVE., STE. 1200 MILWAUKEE, WI 53203
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



02012006 Chg-P CR2E034 (11/05)

4. FEI Number 39-1956725	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZILBER, JOSEPH J 710 N. PLANKINTON AVE., STE. 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>SEE ATTACHED LIST FOR ADDITIONAL OFFICERS</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WIGCHERS, ARTHUR W JR. 710 N PLANKINTON AVE, SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DELISLE, SANDRA J 710 N PLANKINTON AVE, SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOODKNIGHT, SARAH 96 WILLARD STREET, #101 COCOA BEACH, FL 32922 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRANDLICH, JOHN R 710 N PLANKINTON AVE, SUITE 1100 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S YOUNG, JAMES B 710 N PLANKINTON AVE, SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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.

<b>SIGNATURE:</b>		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

40024209

## TOWNE DEVELOPMENT OF INDIAN HARBOR, INC.

DOCUMENT #P99000016424

### Additional Directors/Officers:

FV

BRAUN, ROBERT E.  
710 N. PLANKINTON AVE., SUITE #1000  
MILWAUKEE, WI 53203

V

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

V

BENNETT, JACK A.  
1000 SHOREWOOD DRIVE, #200  
CAPE CANAVERAL, FL 32920

V

BENNETT, MAATH A.  
1000 SHOREWOOD DRIVE, #200  
CAPE CANAVERAL, FL 32920

V

BORRIS, JAMES D.  
710 N. PLANKINTON AVE., SUITE #1100  
MILWAUKEE, WI 53203

V/T

CHEVALIER, STEPHAN J.  
710 N. PLANKINTON AVE., SUITE #1200  
MILWAUKEE, WI 53203

SRV

JANZ, JAMES F.  
710 N. PLANKINTON AVE., SUITE #1200  
MILWAUKEE, WI 53203

V/AS

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

EV

STEIN, GERALD M.  
710 N. PLANKINTON AVE., SUITE #1200  
MILWAUKEE, WI 53203

AS

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