

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000113581

**Entity Name:** CAPE MANAGEMENT, INC.

**Current Principal Place of Business:**

1000 SHOREWOOD DRIVE  
SUITE 200  
CAPE CANAVERAL, FL 32920

**Current Mailing Address:**

C/O JAMES B. YOUNG, SR. VICE PRESIDENT  
710 N. PLANKINTON AVENUE SUITE 1200  
MILWAUKEE, WI 53203 US

**FEI Number:** 48-1285259

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

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

*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.*

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

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name BORRIS, JAMES D  
Address 710 N. PLANKINTON AVENUE, SUITE 1200  
City-State-Zip: MILWAUKEE WI 53203

Title V  
Name HEALY, PAUL G  
Address 1000 SHOREWOOD DRIVE, SUITE 200  
City-State-Zip: CAPE CANAVERAL FL 32920

Title V  
Name GRANDLICH, JOHN R  
Address 710 N. PLANKINTON AVENUE, SUITE 1000  
City-State-Zip: MILWAUKEE WI 53203

Title SV/S  
Name YOUNG, JAMES B  
Address 710 N. PLANKINTON AVENUE, SUITE 1200  
City-State-Zip: MILWAUKEE WI 53203

Title V/AS  
Name JARMUSZ, ANDREW P  
Address 1000 SHOREWOOD DRIVE, SUITE 200  
City-State-Zip: CAPE CANAVERAL FL 32920

Title TREASURER  
Name CHEVALIER, STEPHAN J  
Address 710 N. PLANKINTON AVENUE, SUITE 1200  
City-State-Zip: MILWAUKEE WI 53203

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES B. YOUNG

**SENIOR VICE PRESIDENT 02/15/2013**

Electronic Signature of Signing Officer/Director Detail

Date