

2014 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 04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date