

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000001617

**Entity Name:** CEZ THE DAY, LLC**Current Principal Place of Business:**5949 ADAMS RD.  
OREGON, WI 53575**Current Mailing Address:**5949 ADAMS RD.  
OREGON, WI 53575**FEI Number:** 45-4833071**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**Authorized Person(s) Detail :**

Title	MGRM
Name	CONZEMIUS, WILLIAM C
Address	5949 ADAMS RD.
City-State-Zip:	OREGON WI 53575

Title	MGRM
Name	CONZEMIUS, ANNE E
Address	5949 ADAMS RD.
City-State-Zip:	OREGON WI 53575

Title	MGRM
Name	ZIMMERMAN, JANE F
Address	2999 BUNKER VIEW
City-State-Zip:	SUN PRAIRIE WI 53590

Title	MGRM
Name	ELVEKROG, MARY L
Address	2999 BUNKER VIEW
City-State-Zip:	SUN PRAIRIE WI 53590

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANNE CONZEMIUS**MANAGING MEMBER****01/22/2015**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date