## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# M1400008858

## Entity Name: CENTERPOINTE YACHT SERVICES LLC

## **Current Principal Place of Business:**

700 S WATER ST. MILWAUKEE, WI 53204

### **Current Mailing Address:**

700 S WATER ST. MILWAUKEE, WI 53204

## FEI Number: 45-2768562

## Name and Address of Current Registered Agent:

BALISTRERI, TED 402 CHARLESWOOD LANE NAPLES, FL 34105 US Certificate of Status Desired: No

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

## Authorized Person(s) Detail :

Title	MBR		Title	MBR
Name	MOEDE, PETER H		Name	BALISTRERI, TED J
Address	9180 N UPPER RIV	ER RD.	Address	3416 W RIVERLAND DR
City-State	Zip: MILWAUKEE WI 5	3217	City-State-Zip:	MEQUON WI 53092
Title	MBR		Title	AUTHORIZED REPRESENTATIVE
Name	BALISTRERI, SALV	ATORE	Name	DUCHOW, CRAIG S
Address	3926 GAZEBO HILI	PKWY	Address	700 S WATER ST.
City-State	Zip: MEQUON WI 5309	2	City-State-Zip:	MILWAUKEE WI 53204
Title	AUTHORIZED REP	RESENTATIVE		
Name	PLASZKIEWICZ, JA	NET L		
Address	700 S WATER ST.			
City-State	Zip: MILWAUKEE WI 5	3204		

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: JANET PLASZKIEWICZ

CONTROLLER

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Jan 13, 2015 Secretary of State CC3635767487

Date