

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


**FILED**  
**Jan 21, 2003 8:00 am**  
**Secretary of State**

01-21-2003 90520 026 \*\*\*150.00

UC 3303 AI

**DOCUMENT # F00000000602**

1. Entity Name  
**ANN SACKS TILE & STONE, INC.**



Principal Place of Business  
**444 HIGHLAND DRIVE  
ATTN: TAX DEPT.  
KOHLER WI 53044**

Mailing Address  
**444 HIGHLAND DRIVE  
ATTN: TAX DEPT.  
KOHLER WI 53044**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number **93-0843204**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

|                |                                  |                                 |
|----------------|----------------------------------|---------------------------------|
| TITLE          | <b>D</b>                         | <input type="checkbox"/> Delete |
| NAME           | <b>KOHLER, HERBERT V JR.</b>     |                                 |
| STREET ADDRESS | <b>441 GREEN TREE ROAD</b>       |                                 |
| CITY-ST-ZIP    | <b>KOHLER WI 53044</b>           |                                 |
| TITLE          | <b>D</b>                         | <input type="checkbox"/> Delete |
| NAME           | <b>CHENEY, JEFFREY P.</b>        |                                 |
| STREET ADDRESS | <b>4010 NORTH 50TH STREET</b>    |                                 |
| CITY-ST-ZIP    | <b>SHEBOYGAN WI 53083</b>        |                                 |
| TITLE          | <b>CCO</b>                       | <input type="checkbox"/> Delete |
| NAME           | <b>SACKS, ANN G</b>              |                                 |
| STREET ADDRESS | <b>1740 SW ELIZABETH STREET</b>  |                                 |
| CITY-ST-ZIP    | <b>PORTLAND OR 97201</b>         |                                 |
| TITLE          | <b>ST</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>HAAS, DELBERT</b>             |                                 |
| STREET ADDRESS | <b>N9646 FRANKLIN ROAD</b>       |                                 |
| CITY-ST-ZIP    | <b>ELKHART LAKE WI 53020</b>     |                                 |
| TITLE          | <b>P</b>                         | <input type="checkbox"/> Delete |
| NAME           | <b>HART, JOHN</b>                |                                 |
| STREET ADDRESS | <b>2231 SW SCHOLLS SHERRY RD</b> |                                 |
| CITY-ST-ZIP    | <b>PORTLAND OR 97221</b>         |                                 |
| TITLE          |                                  | <input type="checkbox"/> Delete |
| NAME           |                                  |                                 |
| STREET ADDRESS |                                  |                                 |
| CITY-ST-ZIP    |                                  |                                 |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |  |   |
|----------------|--|---|
| TITLE          |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |  |   |
| STREET ADDRESS |  |   |
| CITY-ST-ZIP    |  |   |
| TITLE          |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |  |   |
| STREET ADDRESS |  |   |
| CITY-ST-ZIP    |  |   |
| TITLE          |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |  |   |
| STREET ADDRESS |  |   |
| CITY-ST-ZIP    |  |   |
| TITLE          |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |  |   |
| STREET ADDRESS |  |   |
| CITY-ST-ZIP    |  |   |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

**SIGNATURE:** *Ann Sacks* **REQUIRED** **1/13/03** **920-457-4441**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**Secretary & Treasurer**

CR2E034 (1/0/02)

Attachment  
F-000000000602  
300/4575

**ANN SACKS TILE & STONE INC.**  
**C/O KOHLER CO. TAX DEPARTMENT**  
**KOHLER, WI 53044**  
**(920) 457-4441**

Jan. 13, 2003

Dear Sir or Madam:

F.E.I.N. NO. 93-0843204

Enclosed is a copy of Report UBR "2003 Uniform Business Report" along with our check for \$150.00 in payment of fees due.

If you have any questions, please contact the Kohler Co., Tax Department.

Sincerely,



M. Peters

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

MP/tvs

Enclosures

WB 000210903