

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000002990

**Entity Name:** AEIEXE CORP.

**Current Principal Place of Business:**

800 UNIVERSITY BAY DR SUITE 200  
MADISON, WI 53705

**Current Mailing Address:**

PO BOX 5620  
MADISON, WI 53705

**FEI Number:** 46-2871170

**Certificate of Status Desired:** No

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

BUSINESS FILINGS INCORPORATED  
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            PRESIDENT, DIRECTOR  
Name            SCHUETT, JERROLD A  
Address        1414 RALEIGH RD SUITE 305  
City-State-Zip: CHAPEL HILL NC 27517

Title            DIRECTOR, ASST. SECRETARY  
Name            SHEA, KEVIN  
Address        800 UNIVERSITY BAY DR SUITE 200  
City-State-Zip: MADISON WI 53705

Title            T  
Name            POPPEN, MITCHELL D  
Address        800 UNIVERSITY BAY DR SUITE 200  
City-State-Zip: MADISON WI 53705

Title            SECRETARY  
Name            HENSHUE, KATHRYN  
Address        800 UNIVERSITY BAY DRIVE  
                  STE 200  
City-State-Zip: MADISON WI 53705

*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:** KATHRYN L/ HENSHUE

**SECRETARY**

**01/02/2019**

Electronic Signature of Signing Officer/Director Detail

Date