

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003331

Entity Name: KAHLER SLATER, INC.**Current Principal Place of Business:**790 N WATER ST
ATTN: NICOLE FERMANIAN SUITE 1700
MILWAUKEE, WI 53202**Current Mailing Address:**790 N WATER ST
ATTN: NICOLE FERMANIAN SUITE 1700
MILWAUKEE, WI 53202 US**FEI Number:** 39-1099621**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CEO
Name	ROBY, GLENN M
Address	790 N WATER ST SUITE 1700
City-State-Zip:	MILWAUKEE WI 53202

Title	CEO
Name	KRUEGER, ALLAN R
Address	790 N WATER ST SUITE 1700
City-State-Zip:	MILWAUKEE WI 53202

Title	SECRETARY
Name	PARENT, TRACIE M
Address	790 N WATER ST SUITE 1700
City-State-Zip:	MILWAUKEE WI 53202

Title	TREASURER
Name	PARENT, TRACIE M
Address	790 N WATER ST SUITE 1700
City-State-Zip:	MILWAUKEE WI 53202

Title	VP
Name	PIETTE, JEFFREY J
Address	790 N WATER ST SUITE 1700
City-State-Zip:	MILWAUKEE WI 53202

Title	VP
Name	SCHNUCK, LAWRENCE J
Address	790 N WATER ST SUITE 1700
City-State-Zip:	MILWAUKEE WI 53202

Title	VP
Name	SANDSCHAFFER, TRINA M
Address	125 S CLARK ST SUITE 675-2
City-State-Zip:	CHICAGO IL 60603

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: TRACIE M PARENT**SECRETARY****04/14/2022**

Electronic Signature of Signing Officer/Director Detail

Date