

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003331

FILED
Jan 13, 2006
Secretary of State

Entity Name: KAHLER SLATER ARCHITECTS, INC.

Current Principal Place of Business:

111 W. WISCONSIN AVE.
ATTN: CAROL GESSERT
MILWAUKEE, WI 532032501

Current Mailing Address:

111 W. WISCONSIN AVE.
ATTN: CAROL GESSERT
MILWAUKEE, WI 532032501

New Principal Place of Business:

111 W. WISCONSIN AVE.
ATTN: THOMAS M. O'BRIEN
MILWAUKEE, WI 532032501 US

New Mailing Address:

111 W. WISCONSIN AVE.
ATTN: THOMAS M. O'BRIEN
MILWAUKEE, WI 532032501

FEI Number: 39-1099621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: 3EOD () Delete
Name: MEYER, GEORGE C
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

Title: 3EOD () Delete
Name: RASCHE, JAMES
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

Title: 3EOD () Delete
Name: MORIN, JILL
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

Title: ASST () Delete
Name: GESSERT, CAROL
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 3EO (X) Change () Addition
Name: MEYER, GEORGE C
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

Title: 3EO (X) Change () Addition
Name: RASCHE, JAMES G
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

Title: 3EO (X) Change () Addition
Name: MORIN, JILL
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

Title: CFO (X) Change () Addition
Name: O'BRIEN, THOMAS M CPA
Address: 111 W. WISCONSIN AVE.
City-St-Zip: MILWAUKEE, WI 532032501

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS M. O'BRIEN

CFO

01/13/2006

Electronic Signature of Signing Officer or Director

_____ Date