

**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

[| LOGOUT |](#)**Foreign Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

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In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** **1. Corporate ID No.** **2. Name of Corporation** **3. Street Address Principal Business Office:**No. and Street: City or Town: State: Zip: Country: **4. Business Phone No.****5. State of Incorporation**State: **6. Brief Description of the Character of Business Conducted in Rhode Island**

**FILED**  
MAR 02 2009  
By 26235986

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed.

| Delete                   | Title     | Individual Name<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|--------------------------|-----------|--|--|
| <input type="checkbox"/> | SECRETARY | RICHARD SCHEPP                                 | 13775 NORTH LEGACY HILLS DRIVE<br>MEQUON, WI 53097 USA     |
| <input type="checkbox"/> | CFO       | WESLEY MCDONALD                                | 8336 NORTH GREENVALE ROAD<br>FOX POINT, WI 53217 USA       |
| <input type="checkbox"/> | Chairman  | R. Lawrence Montgomery                         | 6360 North Lake Dr<br>Whitefish Bay, WI 53217 USA          |
| <input type="checkbox"/> | CEO       | Kevin Mansell                                  | 5370 North Lake Dr.<br>Whitefish Bay, WI 53217 USA         |

Select From Below

Title:

First Name:

Middle Name:

Last Name:

Suffix:

Address:

City:

State:

Zip:

Country:

Clear

Add

## 8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares<br>Number of Shares | Total Issued and Outstanding<br>Num of Shares |
|----------------|-----------------|---------------------|---|---|
| CWP            |                 | \$0.01              | 200,000.00                                  | 99,600.00                                     |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

## Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: AMIE JAECKS

Business Name:

No. and Street: N56 W17000 RIDGEWOOD D

City or Town: MENOMONEE FALLS

Contact Phone: (262) 703-7021 ext:

Contact Email: AMIE.JAECKS@KOHL'S.COM

- Same Address as

State: WI

Zip: 53051

Country: USA

Clear

Please provide an email address to receive an expedited response from the Corporations Division if the filing is rejected for any reason. If no email address is provided, correspondence from the Division will be sent by mail.

Signed this 17 Day of February, 2009 at 11:17:23 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the

*electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By Amie Jaecks

Signature of Authorized Representative of the Corporation

Tax Accountant

Title

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.**

By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this

☒ Accept

☐ Decline

[Click HERE to Submit This Information](#)

Form No. 630  
Revised 09/07

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Help

**FILED**  
MAR 02 2009  
By 116976