(Requ	estor's Name)	<u> </u>
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Special Instructions to Fil	ing Officer.	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **FILING REQUEST**

November 29, 2004

## FLORIDA SECRETARY OF STATE

Type of Filing:

CHANGE OF REGISTERED AGENT

Subject(s):

KETTERING UNIVERSITY

Form(s) Enclosed:

STATEMENT OF CHANGE OF REGISTERED AGENT/OFFICE

Supporting Document(s): NONE

Return Via:

REGULAR MAIL

Filing Method:

ASAP

PLEASE RETURN TO:

PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103 

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Jackie Sorman

## FILED

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		2, 607.1508, or 617.1508, Florida Statutes, this	•
-	ited for a corporation organized under th Sistered office or registered agent, or both	the laws of the State of Michigan	in order
io change is re	ssiered office or registered agent, or both	i, in the state of 1-tortaa.	
1. The name of	the corporation: Kettering University,	Inc.	
2. The principal	office address: 1700 West Third Avenue	ue, Flint, MI 48504-4898	
		<del></del>	
3. The mailing a	address (if different):	· · ·	
4. Date of incorp	poration/qualification: 02/19/2002	Document number:F0200000869	
	I street address of the current registered attment of State:	gent and registered office on file with the	
	CT Corporation System		
	1200 S. Pine Island Road		
	Plantation, FL 33324	÷.	
6. The name and (if changed):	d street address of the new registered agen	at (if changed) and /or registered office	#
	NRAI Services, Inc.		O4 D SECF
	526 E. Park Avenue	· • • •	DEC RETA
	(P.O. Box or personal r	mailbox NOT acceptable)	-3 ARY SSE
	Tallahassee, FL 32301		
The street addre	ess of its registered office and the street identical.	address of the business office of its registered	10: 53
Such change wa	as authorized by resolution duly adopted e corporation has been notified in writin	d by its board of directors or by an officer so a g of the change.	
Jusy	signature of an officer of director)	Susan K. Bolt, VP Administration (Printed or typed name and title)	
I hereby accept I further agree duties, and I an being filed mere been notified in	the appointment as registered agent an to comply with the provisions of all state familiar with and accept the obligation ely to reflect a change in the registered writing of this change.	d agree to act in this capacity. utes relative to the proper and complete perfo n of my position as registered agent. Or, if thi office address, I hereby confirm that the corpo	rmance of my is document is oration has
NRAI Services	Bryllmann (Signature of Registered Agent)	11-29-04 (Date)	
If signing on be	half of an entity:		
Sue Brodtman		Asst. Secretary	
	(Typed or Printed Name)	(Capacity)	

\* \* \* FILING FEE: \$35.00 \* \* \*