

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004164

FILED
Jan 23, 2007
Secretary of State

Entity Name: PROCTOR HOMER WARREN, INC.

Current Principal Place of Business:

295 KIRTS BLVD., STE. 100
TROY, MI 48084

New Principal Place of Business:

200 KIRTS BLVD., STE. 100
TROY, MI 48084

Current Mailing Address:

295 KIRTS BLVD., STE. 100
TROY, MI 48084

New Mailing Address:

200 KIRTS BLVD., STE. 100
TROY, MI 48084

FEI Number: 38-1457868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: C () Delete
Name: PROCTOR, THOMAS W
Address: 335 SYCAMORE COURT
City-St-Zip: BLOOMFIELD, MI 48302

Title: VPST () Delete
Name: GLANTZ, PAUL A
Address: 2842 COLONIAL TRAIL
City-St-Zip: FLOOMFIELD HILLS, MI 48304

Title: VP (X) Delete
Name: SCHICKEL, KAREN I
Address: 7964 DETROIT BLVD.
City-St-Zip: WEST BLOOMFIELD, MI 48323

Title: C () Delete
Name: MASTERS, KENNETH R
Address: 5 THALIA STREET
City-St-Zip: LADERA RANCH,, CA 92694

Title: O () Delete
Name: DONEGAN, THOMAS M JR
Address: 10714 MOSS ISLAND DR
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: PROCTOR, THOMAS W
Address: 2771 TURTLE SHORES DR
City-St-Zip: BLOOMFIELD, MI 48302

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAUL A GLANTZ

VPST

01/23/2007

Electronic Signature of Signing Officer or Director

Date