



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F97000001328 1. Entity Name CALI RV CORP	
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Principal Place of Business 3000 TOWN CENTER 540 SOUTHFIELD, MI 48075 US	Mailing Address 3000 TOWN CENTER 540 SOUTHFIELD, MI 48075 US
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**DO NOT WRITE IN THIS SPACE**



01252007 No Chg-P CR2E034 (11/05)

4. FEI Number 38-3333647	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KASS, MICHAEL  
1505 N FLORIDA AVENUE  
TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reconstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000606253  
01/30/07-80072-001 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTDC NODEL, RICHARD 1760 S. TELEGRAPH RD., #300 BLOOMFIELD HILLS, MI 483020183
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SCHRAM, BRADLEY J 1760 S. TELEGRAPH RD., #300 BLOOMFIELD HILLS, MI 483020183
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 1/26/07 248-355-1500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Davtime Phone #