

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003982

FILED  
Mar 30, 2011  
Secretary of State

Entity Name: KELSEY-HAYES COMPANY

**Current Principal Place of Business:**

12001 TECH CENTER DRIVE  
LIVONIA, MI 48150

**New Principal Place of Business:**

**Current Mailing Address:**

12001 TECH CENTER DRIVE  
LIVONIA, MI 48150

**New Mailing Address:**

FEI Number: 13-3369789

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 323012525 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PLANT, JOHN  
Address: 12001TECH CENTER DRIVE  
City-St-Zip: LIVONIA, MI 48150

Title: VD  
Name: CANTIE, JOSEPH S  
Address: 12001 TECH CENTER DRIVE  
City-St-Zip: LIVONIA, MI 48150

Title: VSD  
Name: WALKER-LEE, ROBIN A  
Address: 12001 TECH CENTER DRIVE  
City-St-Zip: LIVONIA, MI 48150

Title: V  
Name: LUNN, STEVE  
Address: 12001TECH CENTER DRIVE  
City-St-Zip: LIVONIA, MI 48150

Title: AS  
Name: HERMANSON, GARY L  
Address: 12001 TECH CENTER DRIVE  
City-St-Zip: LIVONIA, MI 48150

Title: T  
Name: RAPIN, PETER R  
Address: 12001 TECH CENTER DRIVE  
City-St-Zip: LIVONIA, MI 48150

I hereby 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 all other like empowered.

SIGNATURE: GARY L. HERMANSON

AS

03/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date