

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000002364

1. Entity Name

MEADOWBROOK, INC.

**FILED**  
**Feb 07, 2000 8:00 am**  
**Secretary of State**

02-07-2000 90023 014 \*\*\*158.75

Principal Place of Business	Mailing Address
26600 TELEGRAPH RD., STE. 300 ATTN: MICHAEL G. COSTELLO SOUTHFIELD MI 48034	26600 TELEGRAPH RD., STE. 300 ATTN: MICHAEL G. COSTELLO SOUTHFIELD MI 48034-5370

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	38-1798156	Applied For
		Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> X	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐ **FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State** 10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP EVP PARRY, JAMES R 26600 TELEGRAPH ROAD SOUTHFIELD MI 48034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Chairman of the Board Parry, Sr., James R. 26600 Telegraph Road Southfield, MI 48034 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VPTD KELLY, LEE F 26600 TELEGRAPH ROAD SOUTHFIELD MI 48034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Controller Stewart, Kenneth H. 26600 Telegraph Road Southfield, MI 48034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SVPD RENO, CHERYL L 26600 TELEGRAPH ROAD SOUTHFIELD MI 48034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP President Cubbin, Robert S. 26600 Telegraph Road Southfield, MI 48034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VPGC COSTELLO, MICHAEL G 26600 TELEGRAPH ROAD SOUTHFIELD MI 48034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Director Segal, Merton J. 26600 Telegraph Road Southfield, MI 48034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP ALLEN, KENN R 26600 TELEGRAPH ROAD SOUTHFIELD MI 48034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Director Gardner, Warren D. 26600 Telegraph Road Southfield, MI 48034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VPCO LOHMEYER, WILLIAM J 26600 TELEGRAPH ROAD, STE. 300 SOUTHFIELD MI 48034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP SVP and CFO Lohmeyer, William J., III 26600 Telegraph Road Southfield, MI 48034 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/00

248-204-8025

Date

Daytime Phone #

Michael G. Costello, Sr. VP, General Counsel & Secretary

CR2E034 (9/99)