

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J64114</b> 1. Entity Name <b>SAGINAW PROPERTIES, INC.</b>			
Principal Place of Business <b>2825 BAY ROAD STE 100 SUITE 100 SAGINAW, MI 48603</b>		Mailing Address <b>2825 BAY ROAD STE 100 SUITE 100 SAGINAW, MI 48603</b>	
DO NOT WRITE IN THIS SPACE			
<div style="display: flex; justify-content: space-between;"> <span>02062006</span> <span>No Chg-P</span> <span>CR2E034 (11/05)</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">             4. FEI Number  <b>59-2787623</b> </div> <div style="border: 1px solid black; padding: 2px;">             Applied For  <input type="checkbox"/> Not Applicable           </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>             5. Certificate of Status Desired <input type="checkbox"/> </div> <div> <b>\$8.75</b> Additional Fee Required           </div> </div>			
6. Name and Address of Current Registered Agent  <b>MILLER, LARRY 8500 FAIRWAY BEND FORT MYERS, FL 33912</b>		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 remitting) <small>Signature, typed or printed name of registered agent and title if applicable</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[D] <b>MILLER, LARRY C. 2825 BAY RD #100. SAGINAW, MI 48603</b>	<div style="font-size: 12px; margin-bottom: 20px;">             1101000464617              03/22/06-80002-022 150.00           </div> <div style="font-size: 24px; font-weight: bold;">             DO NOT WRITE IN THIS SPACE           </div>	
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 the empowered.		SIGNATURE <small>Signature and typed or printed name of signing officer or director</small>	