

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000021964

1. Entity Name
420 N. MAIN ST., LLC



Principal Place of Business

ONE TOWNE SQUARE, STE. 1913
SOUTHFIELD, MI 48076

Mailing Address

ONE TOWNE SQUARE, STE. 1913
SOUTHFIELD, MI 48076

DO NOT WRITE IN THIS SPACE



04202004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

30-0017382

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

1100000132913
04/27/04-80067-004 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SELIGMAN FLP, INC.
STREET ADDRESS	ONE TOWNE SQUARE, STE 1913
CITY- ST- ZIP	SOUTHFIELD, MI 48076

TITLE	
NAME	
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CITY- ST- ZIP	

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CITY- ST- ZIP	

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Tammy Wong

4/22/04

Date

348-862-8000

Daytime Phone #