


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007 08:00 A
Secretary of State

DOCUMENT # M02000003427	
1. Entity Name MILL'S PRIDE STORE SUPPORT, LLC	

Principal Place of Business 2 EASTON OVAL COLUMBUS, OH 43219-6036	Mailing Address C/O TAX DEPARTMENT 21001 VAN BORN RD TAYLOR, MI 48180-1340
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04172007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0584777	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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

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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 reinstating) DATE _____

Filing Fee Is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GARGARO, EUGENE A JR 21001 VAN BORN RD TAYLOR, MI 48180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEEKLEY, JOHN R 21001 VAN BORN RD TAYLOR, MI 48180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SZNEWAJS, JOHN G 21001 VAN BORN RD TAYLOR, MI 48180
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11. 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 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:  **4/18/07** **313-274-7400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #