

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000549

FILED
May 07, 2008
Secretary of State

Entity Name: WOLVERINE INVESTORS, L.L.C.

Current Principal Place of Business:

31200 NORTHWESTERN HWY
FARMINGTON HILLS, MI 48334

New Principal Place of Business:

Current Mailing Address:

31200 NORTHWESTERN HWY
FARMINGTON HILLS, MI 48334

New Mailing Address:

FEI Number: 38-3413377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PARTRICH, ROSS H
Address: 31200 NORTHWESTERN HWY
City-St-Zip: FARMINGTON HILLS, MI 48334

Title: MGRM () Delete
Name: PARTRICH, SPENCER M
Address: 31550 NORTHWESTERN HIGHWAY, SUITE 110
City-St-Zip: FARMINGTON HILLS, MI 48334

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROSS H PARTRICH

MGRM

05/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date