## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 830666** 

Entity Name: DOUGLAS N. HIGGINS INC.

**Current Principal Place of Business:** 

3390 TRAVIS POINTE RD.

SUITE A

ANN ARBOR, MI 48108

**Current Mailing Address:** 

3390 TRAVIS POINTE RD.

SUITE A

ANN ARBOR, MI 48108 US

FEI Number: 38-1807765 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CFRA, LLC 100 S. ASHLEY DR. SUITE 400

TAMPA, FL 33602 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

FILED Jan 07, 2016

**Secretary of State** 

CC4525079233

Officer/Director Detail:

Title VP Title ASST. SECRETARY
Name BARTOLONE, BRANDY L Name LUDWIG, TAMARA J

Address 4465 ENTERPRISE AVENUE Address 4465 ENTERPRISE AVENUE

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title PD Title VP, EXECUTIVE SECRETARY,

HIGGINS, DOUGLAS N

Address 3390 TRAVIS POINTE RD., SUITE A WILKIE, KELLY A

Address 3390 TRAVIS POINTE RD SUITE #A

City-State-Zip: ANN ARBOR MI 48108

City-State-Zip: ANN ARBOR MI 48108

Title VP

Name

Name

Name HIGGINS, DANIEL N Name GARRISON, SANDRA K

Address 3390 TRAVIS POINTE RD. SUITE A Address 3390 TRAVIS POINTE RD.

City-State-Zip: ANN ARBOR MI 48108 SUITE A

City-State-Zip: ANN ARBOR MI 48108

Title SECRETARY

Address 3390 TRAVIS POINTE RD.

WILKIE, DAVID J

SUITE A

City-State-Zip: ANN ARBOR MI 48108

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KELLY A. WILKIE VICE-PRESIDENT 01/07/2016