#### 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004003

Entity Name: GABRIEL, ROEDER, SMITH & COMPANY HOLDINGS, INC.

FILED
Mar 12, 2018
Secretary of State
CC4329602366

### **Current Principal Place of Business:**

ONE TOWNE SQUARE SUITE 800 SOUTHFIELD, MI 48076

### **Current Mailing Address:**

ONE TOWNE SQUARE, SUITE 800 SOUTHFIELD, MI 48076 US

FEI Number: 47-5435846 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

BRACCIALARGHE, THEORA ONE EAST BROWARD BLVD., SUITE 505 FT. LAUDERDALE, FL 33301-1804 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

Officer/Director Detail:

Title DP Title DVP

NameKERMANS, JUDITHNameBRACCIALARGHE, THEORAAddressONE TOWNE SQUARE SUITE 800AddressONE TOWNE SQUARE SUITE 800

City-State-Zip: SOUTHFIELD MI 48076 City-State-Zip: SOUTHFIELD MI 48076

Title S Title D

Name SCHEER, CHRISTINE Name ARMSTRONG, BRAD

Address ONE TOWNE SQUARE, SUITE 800 Address ONE TOWNE SQUARE, SUITE 800

City-State-Zip: SOUTHFIELD MI 48076 City-State-Zip: SOUTHFIELD MI 48076

Title D Title D

Name BUIS, MARK Name FALLS, RYAN

Address ONE TOWNE SQUARE, SUITE 800 Address ONE TOWNE SQUARE, SUITE 800

City-State-Zip: SOUTHFIELD MI 48076 City-State-Zip: SOUTHFIELD MI 48076

Title DCEO Title D

Name RANDALL, MARK Name KRIENKE, JOHN

Address ONE TOWNE SQUARE SUITE 800 Address ONE TOWNE SQUARE, SUITE 800

City-State-Zip: SOUTHFIELD MI 48076

## Continues on page 2

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: CHRISTINE SCHEER SECRETARY 03/12/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title D Title D

Name WARD, LEWIS Name KAUSCH, DAVID

Address ONE TOWNE SQUARE SUITE 800 Address ONE TOWNE SQUARE SUITE 800

City-State-Zip: SOUTHFIELD MI 48076 City-State-Zip: SOUTHFIELD MI 48076