2007 FOR PROFIT CORPORATION ANNUAL REPORT

04-23-2007 90265 006 ***150.00 **DOCUMENT #804423** 1. Entity Name R.L. POLK & CO. 40077571 Principal Place of Business Mailing Address 26955 NORTHWESTERN HWY 26955 NORTH WESTERN HWY SOUTHFIELD, FL 48034 SOUTHFIELD, MI 48034 2. Principal Place of Business - No P.O. Box 3. Mailing Address 26955 NORTHWESTE 26955 NORTHWESTERN NW Suite, Apt. #, etc. Suite, Apt. #, etc. 04112007 CR2E034 (12/06) City & State SOUTH FIELD 4. FEI Number Applied For ルエ M1 SOUTHFIELD 38-0934730 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 48033 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 Zip Code 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. THLE Change Change HILE Delete ☐ Addition WALKER, JOSEPH L NAME WALKER, JOSEPH V. 26955 NORTHWESTERN HWY STREET ADDRESS STREET ADDRESS 26955 NORTHWESTERN HWY CITY-ST-ZIP SOUTHFIELD, MI 48034 CITY - ST - ZIP SOUTHFIELD MI 48033 Delete Change TITLE RUE Addition POLK STEPHEN R. 26955 NORTHWEGTERN HWY STEPHEN R. POLK NAME NAME 26955 NORTHWESTERN HWY STREET ADDRESS STREET ADDRESS SOUTHFIELD, MI 48034 CITY-ST-ZIP SOUTHFIELD NI 48033 TIDE TITLE ☐ Delete Change Addition X GOFF, MICHELLE 2695 NORTHWESTERN HWY. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SOUTHFIELD MI 48033 D POLK, STEPHEN R. Change HILE ☐ Delete Addition NAME NAME ZLOST NORTHWESTERN HWY LOUTHRELD MI 48033 STREET ADDRESS STREET ADDRESS CHY-ST ZIP CHY-ST-7IP TITLE ☐ Change Addition TITLE Delete NAME NAME NANCY K. STREET ADDRESS 26957 NO ETHWEITERN HWY SOUTHFIELD MI 48033 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition 1 NAME MODRE, J. MICHAEL HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP SCUTHFIELD W. 48033 12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. JOSEPH.V. WALKER 4/11/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 23, 2007 8:00 am Secretary of State