2002 Uniform Business Report (UBR)

Mar 27, 2002 8:00 am Secretary of State **DOCUMENT #** 828414 1. Entity Name 03-27-2002 90085 039 ***150 00 FOREMOST FINANCIAL SERVICES CORPORATION Principal Place of Business Mailing Address 5600 BEECH TREE DRIVE 5600 BEECH TREE DRIVE GRAND RAPIDS MI 49316 P O BOX 2450 **GRAND RAPIDS MI 49501-2450** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 73-0462770 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE TITI F □ Delete NAME PEPPER, JEFFREY L NAME Leaman, Stephen J STREET ADDRESS STREET ADDRESS 5600 BEECH TREE LANE 4680 Wilshire Blvd CITY-ST-ZIP CITY-ST-ZIP CALEDONIA MI 49316 Los Angeles, CA 90010 Change Addition XX Delete TITLE. TITLE NAME NAME Brown, Martin R BASSOLINO, RONNIE STREET ADDRESS STREET ADDRESS 4680 WILSHIRE BLVD 5600 Beech Tree Lane CITY-ST-ZIP CITY-ST-ZIP Caledonia, MI 49316 LOS ANGELES CA 90010 Change Change X Addition TITLE ☐ Delete TITLE NAME: Boshoven, Stephen J Mountz, Hubert STREET ADDRESS **4680 WILSHIRE BLVD** STREET ADDRESS 5600 Beech Tree Lane CITY-ST-ZIP CITY-ST-ZIP Caledonia, MI 49316 LOS ANGELES CA 90010 Change Addition TITLE AS ☐ Delete TITLE Hannigan, John J NAME NAME HOHL, DOREN E STREET ADDRESS STREET ADDRESS 5600 Beech Tree Lane **4680 WILSHIRE BLVD** CITY-ST-ZIP LOS ANGELES CA 90010 CITY-ST-ZIP Caledonia, MI X Addition AT ☐ Change TITLE ☐ Delete TITLE D/P NAME NAME Chessher, Mark C WOUDSTRA, ROBERT F STREET ADDRESS STREET ADDRESS 4680 Wilshire Blvd 5600 BEECH TREE LANE CITY-ST-ZIP CITY-ST-ZIP Los Angeles, CA 90010 Caledonia Mi **XX** Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME Brizzolara, Joseph A Brizzolara, A Joesph STREET ADDRESS STREET ADDRESS 5600 BEECH TREE LANE 5600 Beech Tree Lane CITY-ST-ZIP CITY-ST-7IP CALEDONIA MI Caledonia, MI 49316 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED

SIGNATURE: X SIGNATURE: X PERFORMANCE OF SIGNING OFFICER OR DIRECTOR Date Date Daylime Phone #