

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 838970 (2)

1. Corporation Name
HIRAM WALKER-AV CO.

Principal Place of Business
3000 TOWN CENTER
STE #3200
SOUTHFIELD MI 48075-1102
US

Mailing Address
P.O. BOX 33006
DETROIT MI 48232-5006
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
07/22/1977

3a. Date of Last Report
05/14/1996

4. FEI Number

38-1586438

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	☐ DELETE
NAME	MCCARTHY, GEORGE F	
STREET ADDRESS	31275 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	PD	☐ DELETE
NAME	ALEXANDER, JOHN	
STREET ADDRESS	222 CEDAR LANE RM 203	
CITY-ST-ZIP	TEANECK NJ 07666	
TITLE	T	☐ DELETE
NAME	CLARK, BLAIR	
STREET ADDRESS	31275 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	SD	☒ DELETE
NAME	WOOTERS, J M	
STREET ADDRESS	31275 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	V	☐ DELETE
NAME	CARPENTER, NED	
STREET ADDRESS	31275 NORTHWESTERN HWY	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	AT	☒ DELETE
NAME	CUDDEBACK, L.C.	
STREET ADDRESS	31275 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CD	☒ Change ☐ Addition
1.2 NAME	McCarthy, George F.	
1.3 STREET ADDRESS	3000 Town Center Ste. 3200	
1.4 CITY-ST-ZIP	Southfield, MI 48075-1102	
2.1 TITLE	PD	☐ Change ☐ Addition
2.2 NAME	Alexander, John	
2.3 STREET ADDRESS	222 Cedar Lane, Apm 203	
2.4 CITY-ST-ZIP	Teaneck, NJ 07666	
3.1 TITLE	T	☒ Change ☐ Addition
3.2 NAME	Clark, Blair A.	
3.3 STREET ADDRESS	3000 Town Center Ste 3200	
3.4 CITY-ST-ZIP	Southfield, MI 48075-1102	
4.1 TITLE	S	☒ Change ☒ Addition
4.2 NAME	Timmons, Leon R.	
4.3 STREET ADDRESS	3000 Town Center Ste 3200	
4.4 CITY-ST-ZIP	Southfield, MI 48075-1102	
5.1 TITLE	VP	☒ Change ☐ Addition
5.2 NAME	Carpenter, Ned	
5.3 STREET ADDRESS	3000 Town Center Ste 3200	
5.4 CITY-ST-ZIP	Southfield, MI 48075-1102	
6.1 TITLE	AT	☒ Change ☒ Addition
6.2 NAME	Cremery, Michael J.	
6.3 STREET ADDRESS	3000 Town Center #3200	
6.4 CITY-ST-ZIP	Southfield MI 48075-1102	

14. I do 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 contained on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael Cremery

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Asst. Treasurer 2/25/97 (313) 965-6644

CR2E034 (9/96)