2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

DOCUMENT# 855153

Entity Name: MASCON SERVICES, INC.

Current Principal Place of Business:

C/O TAX DEPARTMENT
21001 VAN BORN ROAD
TAYLOR, MI 481801340

New Principal Place of Business:

Current Mailing Address:

C/O TAX DEPARTMENT
21001 VAN BORN ROAD
TAYLOR, MI 481801340

New Mailing Address:

FEI Number: 38-2398144 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DPT
Name: SZNEWAJS, JOHN G
Address: 21001 VAN BORN ROAD
City-St-Zip: TAYLOR, MI 481801340

Title: VD
Name: MOLLIEN, JERRY W
Address: 21001 VAN BORN ROAD
City-St-Zip: TAYLOR, MI 481801340

Title: V
Name: MENDELSOHN, KAREN
Address: 21001 VAN BORN ROAD
City-St-Zip: TAYLOR, MI 481801340

Title: V
Name: LEAMAN, LAWRENCE F
Address: 21001 VAN BORN ROAD
City-St-Zip: TAYLOR, MI 481801340

Title: DVS
Name: WITTROCK, GREGORY D
Address: 21001 VAN BORN ROAD
City-St-Zip: TAYLOR, MI 481801340

Title: AS
Name: VANRIPER, YVETTE M
Address: 21001 VAN BORN ROAD
City-St-Zip: TAYLOR, MI 481801340

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: JERRY W. MOLLIEN V 04/04/2012

Electronic Signature of Signing Officer or Director — Date