

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90016 042 ***158.75

DOCUMENT # 855247

1. Entity Name
JOHN CARLO, INC.

Principal Place of Business
45000 RIVER RIDGE DR.
CLINTON TOWNSHIP MI 48038

Mailing Address
45000 RIVER RIDGE DR.
CLINTON TOWNSHIP MI 48038

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
SUITE 200

Suite, Apt. #, etc.
SUITE 200

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

38-1650909

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME CATENACCI, CARLO J.
STREET ADDRESS 45000 RIVER RIDGE DRIVE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038

TITLE CEO ☒ Change ☐ Addition
NAME Catenacci, Carlo J.
STREET ADDRESS 45000 River Ridge Dr, Suite 200
CITY-ST-ZIP Clinton Township, Mi 48038

TITLE VSD ☐ Delete
NAME CATENACCI, JOSEPH E.
STREET ADDRESS 45000 RIVER RIDGE DRIVE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038

TITLE Chief Operations Officer ☒ Change ☐ Addition
NAME Catenacci, Joseph E.
STREET ADDRESS 45000 River Ridge Dr, Suite 200
CITY-ST-ZIP Clinton Township, Mi 48038

TITLE V ☒ Delete
NAME MCELROY, MICHAEL D.
STREET ADDRESS 45000 RIVER RIDGE DRIVE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038

TITLE President ☐ Change ☒ Addition
NAME Catenacci, Michael J.
STREET ADDRESS 45000 River Ridge Drive, Suite 200
CITY-ST-ZIP Clinton Township, Mi 48038

TITLE T ☐ Delete
NAME ROBSON, JOHN T.
STREET ADDRESS 45000 RIVER RIDGE DRIVE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME DONOHUE, MICHAEL
STREET ADDRESS 45000 RIVER RIDGE DRIVE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038

TITLE Executive Vice President ☒ Change ☐ Addition
NAME Donohue, Michael
STREET ADDRESS 45000 River Ridge Dr, Suite 200
CITY-ST-ZIP Clinton Township, Mi 48038

TITLE V ☒ Delete
NAME DURSTON, MORLEY
STREET ADDRESS 45000 RIVER RIDGE DRIVE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/2001

586-416-4500

CR2E034 (9/01)