

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003797

Entity Name: JOHN K. BURCH COMPANY

FILED  
Jan 16, 2004  
Secretary of State

**Current Principal Place of Business:**

4200 BROCKTON DRIVE SE  
GRAND RAPIDS, MI 49512

**New Principal Place of Business:**

**Current Mailing Address:**

4200 BROCKTON DRIVE SE  
GRAND RAPIDS, MI 49512

**New Mailing Address:**

FEI Number: 38-0384980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCIVER, MICHAEL  
4402 HARNEY COURT  
NEW PORT RICHIE, FL 34655 US

**Name and Address of New Registered Agent:**

RIETSMA II, LEE A  
1707 DOVE FIELD PLACE  
BRANDON, FL 33510 US

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: LEE A RIETSMA II

01/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: BURCH, JOHN B  
Address: 4200 BROCKTON DRIVE SE  
City-St-Zip: GRAND RAPIDS, MI 49512

Title: D ( ) Delete  
Name: BURCH, GRETCHEN J  
Address: 4200 BROCKTON DRIVE SE  
City-St-Zip: GRAND RAPIDS, MI 49512

Title: DS ( ) Delete  
Name: BURCH, PAMELA S  
Address: 4200 BROCKTON DRIVE SE  
City-St-Zip: GRAND RAPIDS, MI 49512

Title: VP ( ) Delete  
Name: GOVERNAL, JOSEPH J  
Address: 4200 BROCKTON DRIVE SE  
City-St-Zip: GRAND RAPIDS, MI 49512

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOHN B BURCH

P

01/16/2004

Electronic Signature of Signing Officer or Director

Date