

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 10, 2006 8:00 am
Secretary of State

05-10-2006 90104 021 ***150.00

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1. Entity Name
ROUSH INDUSTRIES, INC.



Principal Place of Business
3511 PLOVER AVENUE
SUITE 113
NAPLES, FL 34117

Mailing Address
12445 LEVAN ROAD
LIVONIA, MI 48150

60038040



04262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
38-2080919

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

C T CORPORATION-SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C ROUSH, JACK
12445 LEVAN ROAD
LIVONIA, MI 48150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO LYALL, EVAN D
12445 LEVAN ROAD
LIVONIA, MI 48150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P SMITH, DOUG
12445 LEVAN ROAD
LIVONIA, MI 48150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S JOLLIFFE, JAY R
12445 LEVAN ROAD
LIVONIA, MI 48150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T WOZNIACKI, ANDY
12445 LEVAN ROAD
LIVONIA, MI 48150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sylvia Gankowska* **SYLVIA GANKOWSKA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/06
Date

(734) 779-7497
Daytime Phone #