

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005377

Entity Name: PETER BASSO ASSOCIATES, INC.

FILED  
Jul 13, 2006  
Secretary of State

**Current Principal Place of Business:**

5145 LIVERNOIS STE. 100  
TROY, MI 48098

**New Principal Place of Business:**

Current Mailing Address:  
5145 LIVERNOIS STE. 100  
TROY, MI 48098

**New Mailing Address:**

FEI Number: 38-2924399      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

RETTICH, KEVIN C  
18500 GULF BLVD #307  
INDIAN SHORES, FL 33785 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: BASSO, PETER  
Address: 5145 LIVERNOIS STE. 100  
City-St-Zip: TROY, MI 48098

Title: DP ( ) Delete  
Name: WANG, JASON  
Address: 5145 LIVERNOIS STE. 100  
City-St-Zip: TROY, MI 48098

Title: DTPV ( ) Delete  
Name: ENGLEHART, DANIEL J  
Address: 5145 LIVERNOIS STE. 100  
City-St-Zip: TROY, MI 48098

Title: VPS ( ) Delete  
Name: RETTICH, KEVIN C  
Address: 5145 LIVERNOIS STE. 100  
City-St-Zip: TROY, MI 48098

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

Title: C (X) Change ( ) Addition  
Name: BASSO, PETER J  
Address: 5145 LIVERNOIS STE. 100  
City-St-Zip: TROY, MI 48098

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 exemption stated 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 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: KEVIN C RETTICH

SVP

07/13/2006

Electronic Signature of Signing Officer or Director

Date