## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000006794

PAN, C. JEFF

DALLAS, TX 75202

1445 ROSS AVENUE, STE, 4200

Name:

Address:

City-St-Zip:

Entity Name: SUMMIT GLOBAL PARTNERS OF MICHIGAN, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
3001 WEST BIG BEAVER ROAD, STE. 306 TROY, MI 48084				1. D	1445 ROSS AVENUE, SUITE 4200 DALLAS, TX 75202			
Current M		New Mailing Address:						
1445 ROSS AVENUE, STE. 4200 DALLAS, TX 75202				555 PLEASANTVILLE ROAD SUITE 160S BRIARCLIFF MANOR, NY 10510				
FEI Number:	: 38-3528229	FEI Number Ap	plied For()	FEI Numbe	er Not Appli	cable ( )	Certificate of Status	Desired ( )
Name and	d Address of C	urrent Registe	ered Agent:	N	lame and	Address o	f New Registered A	gent:
1200 SOU PLANTATI The above	PORATION SYS ITH PINE ISLAI ION, FL 33324 anamed entity se of Florida.	ND ROAD US	ement for the pur	pose of c	changing its	s registere	d office or registered	agent, or both,
SIGNATUR	RE.							
OIOINATOI		ic Signature of I	Registered Agent	 t			Date	
Election Car		g Trust Fund Cont	_					
OFFICERS	S AND DIREC	TORS:		Α	DDITIONS	S/CHANGI	ES TO OFFICERS AI	ND DIRECTOR
Title: Name: Address: City-St-Zip:	PARRY, JAMES	G BEAVER ROAD,	STE. 306	Na Ad	itle: ame: ddress: ity-St-Zip:	P WAGNER, J 1445 ROSS DALLAS, TX	AVENUE	
Title: Name: Address: City-St-Zip:	PARRY, JAMES	G BEAVER ROAD,	STE. 306	Na Ad	itle: ame: ddress: ity-St-Zip:	555 PLEAS	(X) Change()Addition ERNEST J II ANTVILLE ROAD F MANOR, NY 10510	
Title: Name: Address: City-St-Zip:	BOWMAN, STE	ENUE, STE. 4200		Na Ad	itle: ame: ddress: ity-St-Zip:		(X) Change ( ) Addition AMEE ANTVILLE ROAD F MANOR, NY 10510	
Title: Name: Address: City-St-Zip:	ESLICK, DAVID			Na Ad	itle: ame: ddress: ity-St-Zip:		(X) Change ( ) Addition R, ROBERT ANTVILLE RD F MANOR, NY 10510	
Title:	SVP ()	Delete		Ti	itle:	AT	(X) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

HESS, DAVID

555 PLEASANTVILLE ROAD

BRIARCLIFF MANOR, NY 10510

SIGNATURE: NAMEE OBERST AS 04/17/2006