

306000007036

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

FILED

2006 NOV -9 A 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000272175 3)))



H060002721753ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

FOREIGN PROFIT/NONPROFIT CORPORATION

Comerica Legacy Foundation, Incorporated

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. Comerica Legacy Foundation, Incorporated

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. California

(State or country under the law of which it is incorporated)

3. 94-2833444

(FBI number, if applicable)

4. 12/18/1981

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 101 North Main Street, Suite 100, Ann Arbor, MI 48104

(Principal office address)

101 North Main Street, Suite 100, Ann Arbor, MI 48104

(Current mailing address)

8. Charitable purposes within meaning of Sec. 501(c)(3) of Internal Rev. Code

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation

Office Address: 1200 South Pine Road

Plantation

(City)

Florida 33324

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Claudia L. Saari

(Registered agent's signature)

Claudia L. Saari
Asst. Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED

2006 NOV -9 A 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: SEE BELOW

Address: _____

Director: _____

Address: _____

B. OFFICERS / DIRECTORS

President: Peter W. Ronan

Address: P.O. Box 75000

Detroit, MI 48275

Vice President: Scott A. Drogs

Address: 101 North Main Street, Suite 100, Mail Code 9413

Ann Arbor, MI 48104

Secretary: Gregory A. Schupra

Address: 101 North Main Street, Suite 100, Ann Arbor, MI 48104

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gregory A. Schupra, Secretary
(Typed or printed name and capacity of person signing application)

**State of California
Secretary of State**

FILED

2006 NOV -9 A 11: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF STATUS
DOMESTIC CORPORATION**

I, **BRUCE McPHERSON**, Secretary of State of the State of California, hereby certify that on the **18th day of December, 1981**, **COMERICA LEGACY FOUNDATION** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day
of October 31, 2006.



BRUCE McPHERSON
Secretary of State

wmm

NP-25 (REV 03/31/05)

05P 05 4201