2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 01, 2008 8:00 am Secretary of State DOCUMENT # F0700000052 02-01-2008 90024 004 ***158.75 CSSC INVESTMENT ADVISORY SERVICES, INC. Principal Place of Business Mailing Address 755 W BIG BEAVER - STE 2000 755 W BIG BEAVER - STE 2000 TROY, MI 48084 TROY, MI 48084 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222008 Chg-P CR2E034 (12/06) Applied For 4. FELNumber City & State City & State 38-3394334 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code City Fi 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PC ■ Addition ☐ Change TITLE ☐ Delete TITLE SMITH, ERIC S NAME NAME 755 W BIG BEAVER - STE 2000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TROY, MI 48084 CITY-ST-ZIP VPD ☐ Delete ☐ Change ☐ Addition TITLE TITLE FRY, KEITH A NAME NAME 755 W BIG BEAVER - STE 2000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TROY, MI 48084 CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition TITLE TREASURER TITLE FRY, KEITH A. NAME NAME 755 WEST BIG BEAVER, STE 2000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TRUY, MI 450 PY SECRETARY ☐ Change ☐ Delete TITLE ☐ Addition TITLE FRY, KEITH A. NAME NAME 755 WEST BIG BEAVER, STE 2000

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.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE: _

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

TITLE

NAMÉ STREET ADDRESS TROY MI 40084

SMITH, JETTREY A.

TROY, MI 48084

755 WEST BIO GEAVER, STE 2000

DIRECTOR

KEITH A SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

1/31/2008

248-244-7980

☐ Change

☐ Change

☐ Addition

Addition

FILED

Daytime Phone #