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**Apr 21, 1999 8:00 am**  
**Secretary of State**

04-21-1999 90110 019 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # F70522**  
 1. Corporation Name  
**THE OKAHUMPKA CORPORATION**



Principal Place of Business: 2701 UNIVERSITY DR SUITE 320 AUBURN HILLS MI 48326 US  
 Mailing Address: 2701 UNIVERSITY DR SUITE 320 AUBURN HILLS MI 48326 US

DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified  
**03/10/1982**

2. Principal Place of Business (21-23)  
 2a. Mailing Address (26-28)  
 24. Zip (25) Country (29) (30)

4. FEI Number: **59-2175753**  
 Applied For:  Yes  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75** Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00** May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD DOUT, JACQUELINE 2701 UNIVERSITY DR., SUITE 320 AUBURN HILLS MI 48326	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P Joseph H Stegmayer 2701 University Drive, Suite 300 Auburn Hills MI 48326
TITLE	VD SURLES, PHILIP C 2550 WALNUT HILL LN DALLAS TX 48326	<input type="checkbox"/> DELETE	2.1 TITLE D Surles, Philip C. 2701 University Drive, Suite 300 Auburn Hills MI 48326
TITLE	AS BAUMAN, COLLEEN T 2701 UNIVERSITY DR., SUITE 320 AUBURN HILLS MI 48326	<input checked="" type="checkbox"/> DELETE	3.1 TITLE AT Jimmy Paul 2701 University Drive, Suite 300 Auburn Hills MI 48326
TITLE	CD YOUNG, WALTER R JR 2701 UNIVERSITY DR., SUITE 320 AUBURN HILLS MI 48326	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE	VSD COLLINS, JUR J H 2701 UNIVERSITY DR., SUITE 320 AUBURN HILLS MI 48326	<input type="checkbox"/> DELETE	5.1 TITLE VSD Collins, John J Jr. 2701 University Drive, Suite 300 Auburn Hills MI 48326
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 unchanged, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jimmy Paul Jimmy Paul ASST. TREASURER 1/20/99 (248) 340-7753  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)