FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F93000004844

VILLAGE GREEN MANAGEMENT CO. OF MICHIGAN

Principal Place of Business		Mailing Address				
30833 NORTHWESTERN HWY. SUITE 300		30833 NORTHWESTERN HWY. SUITE 300				
FARMINGTON HILLS MI 48334		FARMINGTON HILLS MI 48334.		DO NOT-WRITE IN TH	IS SPACE =====	
, James and					3. Date Incorporated or Qualifed 10/26/1993	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		38-1874366	Not Applicable	
Suite, Apt. 1	#. etc.	Suite, Apt. #, etc.				\$8.75 Additional
22	.,	27		5. Certifcate of Status Desired	Fee Required	
City & State	•	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year	Intangible
24	25	<u> </u>	30		Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Current		-		10. Name and Address of New Registere	d Agent
81 Name						
C T CORPORATION SYSTEM					(DO DO N) I i Not A contable)	
1200 S. PINE ISLAND RD.			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	ļ
PLAN	ITATION FL 33324		83			
			84	City	F	85 Zip Code
44 Day 1 - CO2 0000 and 502 4509. Florido Statutos the above named compretion exhaults this statement for the autropes of changing its register						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.						
agent. I ar	n familiar with, and accept the obligation	ons of, Section 607.0505, Florid	ia Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: R	Parietered Agent &	inhahira mauirad	when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	زرانو	resident ,	Change ☐ Addition
NAME			1.2 NAME	7	20 50h 100 + 7 1 11	
l .	PAGE MOST SUCCESSION LIBERY MOSS		1	12 NAME TERRY ShWART 2 13 STREET ADDRESS 30333 NGRY 11 WESTERIA HWY #300		V1 #300
STREET ADDRESS	•				genington Hills, MI 48	1274
CITY-ST-ZIP	FARMINGTON HILLS MI 48334	☐ DELETE	1.4 CITY-ST-2 2.1 TITLE		ARONIGIEN MILL MILLE	Change Addition
TTILE I						
NAME			2.2 NAME	\ .		
STREET ADDRESS			2.3 STREET A	ļ		ļ
CITY-ST-ZIP			2. 4 CITY-ST-		another.	Change Addition
TITLE	•		3.1 TITLE	مع در	erethry	Change Addition
NAME			3.2 NAME	E49	gene Walsat 1833 Northwestern Hug RNW 4720 Hills/Mi	4.300
STREET ADDRESS			3.3 STREET A	DDRESS كن DDRESS	1838 101/3/1000/11/11/11/11	102211
CITY-ST-ZIP	FARMINGTON HILLS MI		3.4. CITY-ST-	ZIP /- /-//	RINI, 19701 19111-5/111 7	
TITLE	DELETE 4.1T		4.1 TITLE	-	· ·	Change Addition
NAME	 	•	4, 2 NAME	1		{
STREET ADDRESS	•		4.3 STREET A	DDRESS		1
CITY-ST-ZIP			4.4 CITY-ST-2	ZIP		
ΠΤLE		☐ DELETE	5.1 TITLE	, T		Change Addition
NAME			5.2 NAME	ļ		ļ
STREET ADDRESS			5.3 STREET A	DORESS		f
CITY ST 7ID		4	5.4 CITY- ST-	ZIP		<u>_</u>

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 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

erite.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

4-1699

248.932.2720

☐ Change

Addition

FILED

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90059 015 ***150.00