

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 03, 2001 8:00 am**  
**Secretary of State**

04-03-2001 90025 035 \*\*\*158.75

0586848

**DOCUMENT # F94000001953**

1. Entity Name

**AGREE REALTY CORPORATION**

Principal Place of Business

**31850 NORTHWESTERN HIGHWAY  
 FARMINGTON HILLS MI 48334**

Mailing Address

**31850 NORTHWESTERN HIGHWAY  
 FARMINGTON HILLS MI 48334**

**C0040266**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **38-3148187**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
 1201 HAYS ST.  
 SUITE 105  
 TALLAHASSEE FL 32301**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	AGREE, RICHARD	
STREET ADDRESS	31850 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI 48344	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROSENBERG, EDWARD	
STREET ADDRESS	31850 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI 48344	
TITLE	VS	<input type="checkbox"/> Delete
NAME	HOWE, KENNETH	
STREET ADDRESS	31850 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	D	<input type="checkbox"/> Delete
NAME	KALIL FARRIS G	
STREET ADDRESS	31850 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROTCHFORD, MICHAEL	
STREET ADDRESS	31850 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI 48344	
TITLE	D	<input type="checkbox"/> Delete
NAME	WACHS, ELLIS G	
STREET ADDRESS	31850 NORTHWESTERN HWY.	
CITY-ST-ZIP	FARMINGTON HILLS MI 48344	

TITLE	<del>AGREE, RICHARD</del>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gene Silverman	
STREET ADDRESS	31850 Northwestern Hwy	
CITY-ST-ZIP	Farmington Hills, mi 48334	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth R. Howe* **KENNETH R. HOWE** 3/24/01 248-737-4190  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)