

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2005 08:00 AM
Secretary of State

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



03222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
38-3148187

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	AGREE, RICHARD
STREET ADDRESS	31850 NORTHWESTERN HWY.
CITY-ST-ZIP	FARMINGTON HILLS, MI 48344
TITLE	D
NAME	SILVERMAN, GENE
STREET ADDRESS	31850 NORTHWESTERN HWY.
CITY-ST-ZIP	FARMINGTON HILLS, MI 48344
TITLE	VS
NAME	HOWE, KENNETH
STREET ADDRESS	31850 NORTHWESTERN HWY.
CITY-ST-ZIP	FARMINGTON HILLS, MI
TITLE	D
NAME	KALIL FARRIS G
STREET ADDRESS	31850 NORTHWESTERN HWY.
CITY-ST-ZIP	FARMINGTON HILLS, MI
TITLE	D
NAME	ROTCHFORD, MICHAEL
STREET ADDRESS	31850 NORTHWESTERN HWY.
CITY-ST-ZIP	FARMINGTON HILLS, MI 48344
TITLE	D
NAME	WACHS, ELLIS G
STREET ADDRESS	31850 NORTHWESTERN HWY.
CITY-ST-ZIP	FARMINGTON HILLS, MI 48344

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04/12/05-80029-016 158.75

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/1/05 248-737-4190