

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90125 050 ***158.75

DOCUMENT # F95000001385

1. Entity Name
WILSON, KEMP & ASSOCIATES, INC.



Principal Place of Business
**400 RENAISSANCE CENTER, SUITE 2155
DETROIT, MI 48243**

Mailing Address
**400 RENAISSANCE CENTER, SUITE 2155
DETROIT, MI 48243**

40045125



03202007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
38-1878151

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LOGGERHEAD ASSOCIATES, LTD
14255 US HIGHWAY ONE
STE, 208
NORTH PALM BEACH, FL 33408**

7. Name and Address of New Registered Agent

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. 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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CT
WILSON, THOMAS A
400 RENAISSANCE CENTER, SUITE 2155
DETROIT, MI 48243** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PS
KEMP, ROBERT D JR.
400 RENAISSANCE CENTER, SUITE 2155
DETROIT, MI 48243** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COUZENS, FRANK
400 RENAISSANCE CENTER, SUITE 2155
DETROIT, MI 48243** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GREGORY, E. MARK III
400 RENAISSANCE CENTER, SUITE 2155
DETROIT, MI 48243** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CHANG, ENRIQUE
400 RENAISSANCE CNTR, STE 2155
DETROIT, MI 48243** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MORAN, JOSEPH A
400 RENAISSANCE CTR, STE 2155
DETROIT, MI 48243** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/07 (313) 259-6210
Date Daytime Phone #