## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # F9600003915 Mar 27, 2000 8:00 am 1. Entity Name Secretary of State EMPIRE OF MICHIGAN, INC. 03-27-2000 90069 033 \*\*\*150.00 Principal Place of Business Mailing Address 8181 LOGISTIC DR PO BOX 17 ZEELAND MI 49464-0017 ZEELAND MI 49464-0017 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 38-3135188 Not Applicable Country Country Zip \$8.75 Additional Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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, 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 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE CE<sub>0</sub> ☐ Delete TITLE NAME NAME HIGHLEY, THOMAS H STREET ADDRESS STREET ADDRESS 8181 LOGISTIC DR CITY-ST-ZIP CITY-ST-ZIP ZEELAND MI 49464-0017 ☐ Addition Change ☐ Delete TITI F TITLE NAME NAME JOHANDES, STEPHEN J III STREET ADDRESS STREET ADDRESS 8181 LOGISTIC DR CITY-ST-ZIP CITY-ST-7IP ZEELAND MI 49464-0017 C.0.0. Change Addition ☐ Delete TITLE TITLE GROSSMAN, STEPHEN R NAME NAME STREET ADDRESS STREET ADDRESS 8181 LOGISTIC DR CITY-\$T-ZIP CITY-ST-ZIP ZEELAND MI 49464-0017 ☐ Change Addition Delete TITLE DALLY, FLOYD E NAME NAME STREET ADDRESS STREET ADDRESS 8181 LOGISTIC DR CITY-ST-ZIP CITY-ST-ZIP ZEELAND MI 49464-0017 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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

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

127/00 616-772-7