CR2E034 (10/00)

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 02, 2001 8:00 am Secretary of State DOCUMENT # F96000004008 1. Entity Name SMI RETAIL CORP. 5-02-2001 90182 022 ***150 00 Principal Place of Business Mailing Address 700 E. 48TH ST. NORTH C/O TAX DEPARTMENT 21001 VAN BORN ROAD SIOUX FALLS SD 57104 TAYLOR MI 48180 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 46-0420248 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New 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 , () į 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 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change Addition ☐ Delete TIT! F TITLE SWEDEEN, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 700 E. 48TH ST. NORTH CITY-ST-ZIP CITY-ST-ZIP SIOUX FALLS SD 57104 **X** Change ☐ Addition ☐ Delete V T AS D TITLE TITLE MOSTELLER, RICHARD G NAME NAME STREET ADDRESS STREET ADDRESS 21001 VAN BORN RD. CITY-ST-7iP CITY-ST-ZIP TAYLOR MI 48180 ☐ Change ■ Addition DVS ☐ Delete TITLE TITLE GARGARO, EUGENE A JR NAME NAME STREET ADORESS STREET ADDRESS 21001 VAN BORN RD. CITY-ST-ZIP CITY-ST-ZIP TAYLOR MI 48180 ☐ Delete ☐ Change ☐ Addition TITLE TITLE KENNEDY, RAYMOND F NAME NAME STREET ADDRESS 21001 VAN BORN RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAYLOR MI 48180 ☐ Change TITLE XX Delete TITLE **X**XAddition CHADWICK, DOUGLAS NAME NAME Paul Gillaspey 700 E. 48th. St. North STREET ADDRESS HWY 105 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sioux Falls, SD NORTHWOOD IA 50459 TITLE ☐ Delete TITLE Change ■ Addition NAME DORAN, DAVID A NAME STREET ADDRESS 21001 VAN BORN RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAYLOR MI 48180

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

David A. Doran

4/24/01

313/792-6162

Daytime Phone #