

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

2002

FILED

03 JAN -3 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT *00-03*

DO NOT WRITE IN THIS SPACE

DOCUMENT # *F97000006893*

1. Entity Name

Sally Foster, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

285. Parkway East

3. Mailing Address

2125 Butterfield Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Duncan, SC

Troy, MI

City & State

City & State

29334

48084

Zip

Country

Zip

Country

4. FEI Number

38-3084766

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Plantation

City

FL

Zip Code
33324

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

Claudia L. Saari
Signature, typed or printed name of registered agent and title if applicable.

Claudia L. Saari
Asst. Secretary

(NOTE: Registered Agent signature required when reinstating)

12/13/02
DATE

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Alan Bittker 2125 Butterfield Road Troy, MI 48084
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP Marian Roberge 2125 Butterfield Road Troy, MI 48084
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Camille Cleveland 2125 Butterfield Road Troy, MI 48084
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Ed Stassen 2125 Butterfield Road Troy, MI 48084
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Assistant Treasurer Sandy Berry 2125 Butterfield Road Troy, MI 48084
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Sandy Berry* Assistant Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/02 248-637-8479
Date Daytime Phone #

CR2E034B (12/01)

2012