2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# F98000002750

Entity Name: 8600 CORPORATION

Current Principal Place of Business:

6735 TELEGRAPH RD., STE. 110
BLOOMFIELD HILLS, MI 48301

New Principal Place of Business:

6735 TELEGRAPH RD., STE. 110
BLOOMFIELD HILLS, MI 483013143

Current Mailing Address:

6735 TELEGRAPH RD., STE. 110
BLOOMFIELD HILLS, MI 48301

New Mailing Address:

6735 TELEGRAPH RD., STE. 110
BLOOMFIELD HILLS, MI 483013143

FEI Number: 38-2906865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES LLC
800 N. MAGNOLIA AVE., STE. 1500
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CP ( ) Delete
Name: GOLDBERG, TOM J
Address: 6735 TELEGRAPH RD., STE. 110
City-St-Zip: BLOOMFIELD HILLS, MI 48301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOLDBERG, TOM J
Address: 6735 TELEGRAPH RD., STE. 110
City-St-Zip: BLOOMFIELD HILLS, MI 483013143

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM J GOLDBERG P 01/05/2009

Electronic Signature of Signing Officer or Director — Date