2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachmen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED May 24, 2000 8:00 am Secretary of State DOCUMENT # F98000002912 1. Entity Name MICHIGAN THIRD AVENUE CORP. 05-24-2000 90048 004 ***150.00 Principal Place of Business Mailing Address 38345 W. TEN MILE ROAD. STE. 170 38345 W. TEN MILE ROAD, STE. 170 FARMINGTON HILLS MI 48335 FARMINGTON HILLS MI 48335-2883 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State APPLIED FOR Not Applicable Country \$8.75 Additional Zip 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 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees П (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition DST TITLE ☐ Change TITLE ☐ Delete CAPOZZOLI, JOSEPH NAME NAME STREET ADDRESS STREET ADDRESS 38345 W. TEN MILE ROAD, STE. 170 CITY-ST-ZIP CITY-ST-ZIP FARMINGTON HILLS MI 48335 ☐ Addition Change ☐ Delete TITLE TITLE CAPOZZOLI, PAMELA NAME NAME 38345 W. TEN MILE ROAD, STE. 170 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FARMINGTON HILLS MI 48335 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE MILLER, THOMAS NAME NAME 31600 WHITTINGTON ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FARMINGTON HILLS MI 48336 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TIT! F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if