

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F98000004237**

1. Entity Name

ACCENT MOBILE HOMES, INC.**FILED****Apr 30, 2001 8:00 am**
Secretary of State

04-30-2001 90009 036 ***150.00

Principal Place of Business

**2701 UNIVERSITY DRIVE
SUITE 300
AUBURN HILLS MI 48326**

Mailing Address

**2701 UNIVERSITY DRIVE
SUITE 300
AUBURN HILLS MI 48326**

2. Principal Place of Business

2701 CAMBRIDGE CT

Suite, Apt. #, etc.

3. Mailing Address

2701 CAMBRIDGE CT

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-1642122

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

Name

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

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE **P** ☐ Delete
NAME **GOOD, GARY**
STREET ADDRESS **2701 UNIVERSITY DR. #300**
CITY-ST-ZIP **AUBURN HILLS MI 48326**TITLE ☒ Change ☐ Addition
NAME **2701 CAMBRIDGE CT, SUITE 300**
STREET ADDRESS
CITY-ST-ZIPTITLE **SD** ☐ Delete
NAME **COLLINS, JOHN J**
STREET ADDRESS **2701 UNIVERSITY DR. #300**
CITY-ST-ZIP **AUBURN HILLS MI 48326**TITLE **VSD** ☒ Change ☐ Addition
NAME **2701 CAMBRIDGE CT, SUITE 300**
STREET ADDRESS
CITY-ST-ZIPTITLE **T** ☒ Delete
NAME **BEVERLEIN, GORDY**
STREET ADDRESS **2701 UNIVERSITY DR. #300**
CITY-ST-ZIP **AUBURN HILLS MI 48326**TITLE **T** ☒ Change ☐ Addition
NAME **RUSSELL, MARK**
STREET ADDRESS **2701 CAMBRIDGE CT, SUITE 300**
CITY-ST-ZIPTITLE **DVP** ☐ Delete
NAME **COLE, M. MARK**
STREET ADDRESS **2701 UNIVERSITY DR. #300**
CITY-ST-ZIP **AUBURN HILLS MI 48326**TITLE **VP** ☒ Change ☐ Addition
NAME **2701 CAMBRIDGE CT, SUITE 300**
STREET ADDRESS
CITY-ST-ZIPTITLE **VP** ☒ Delete
NAME **STEGMAYER, JOSEPH**
STREET ADDRESS **2701 UNIVERSITY DRIVE SUITE 300**
CITY-ST-ZIP **AUBURN HILLS MI 48326**TITLE **AT** ☒ Change ☐ Addition
NAME **PAUL, JIMMY**
STREET ADDRESS **2701 CAMBRIDGE CT, SUITE 300**
CITY-ST-ZIP **AUBURN HILLS, MI 48326**TITLE **VP** ☐ Delete
NAME **LONERGAN, DAN**
STREET ADDRESS **2701 UNIVERSITY DR., SUITE 300**
CITY-ST-ZIP **AUBURN HILLS MI 48326**TITLE ☒ Change ☐ Addition
NAME **2701 CAMBRIDGE CT, SUITE 300**
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

Jimmy PAUL 4/18/01 248-340-7753

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

8/5/664

Doc. # F98000004237

ACCENT MOBILE HOMES, INC.

BOARD OF DIRECTORS

Walter R. Young

John J. Collins, Jr.

Philip C. Surles

OFFICERS

<u>Name</u>	<u>Title</u>
Garry Good	President
Dan Lonergan	Vice President, Operations
M. Mark Cole	Vice President
Mark Russell	Assistant Secretary/Treasurer
John J. Collins, Jr.	Vice President, Secretary & General Counsel
Jimmy Paul	Assistant Treasurer
Laurie Hough	Assistant Treasurer

ADDRESS

The address for all of the above individuals is:

**2701 Cambridge Court, Suite 300
Auburn Hills, MI 48326**