## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Aug 04, 2005 8:00 am Secretary of State **DOCUMENT # F98000005089** 1. Entity Name 08-04-2005 90004 028 \*\*\*550 00 ESCAMBIA GAS PRODUCERS, INC. Mailing Address Principal Place of Business 425 SOUTH MAIN STREET, SUITE 201 425 SOUTH MAIN STREET, SUITE 201 50059923 ANN ARBOR, MI 48104 ANN ARBOR, MI 48104 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 07262005 Chq-P Applied For 4. FEI Number City & State City & State 38-3339438 Not Applicable Country Country Zip Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NQTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 7, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. C Delete TITLE Change ☐ Addition TITLE NAME ANDERSON, GERARD M NAME STREET ADDRESS STREET ADDRESS 425 SOUTH MAIN STREET, SUITE 201 ANN ARBOR, MI 48104 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance ☐ Addition RANGER, CURTIS T NAME STREET ADDRESS STREET ADDRESS 425 SOUTH MAIN STREET, SUITE 201 ANN ARBOR, MI 48104 CITY-ST-ZIP CITY ST-ZIP TITLE D ☐ Delete TITLE ☐ Change ☐ Addition BEALE, SUSAN M NAME NAME STREET ADDRESS STREET ADORESS 2000 2ND AVE DETROIT, MI 48226 CITY-ST-ZIP CITY-ST-ZIP St Delete TITLE Vice President Finance ☐ Chance **★** Addition TITLE MCCARGAR, KENT L NAME Mark Rigby 425 SOUTH MAIN STREET, SUITE 201 STREET ADDRESS STREET ADDRESS 414 S. Main Street, Suite 600 CITY-ST-ZIP ANN ARBOR, MI 48104 CITY-ST-7IP Ann Arbor, MI 48104 Delete DILE ☐ Change ■ Addition TITLE EARLEY, ANTHONY F JR NAME NAME STREET ADDRESS 2000 2ND AVE STREET ADDRESS CITY-ST-ZIP DETROIT, MI 48226 CITY+ST-7IP ☐ Defete TITLE ☐ Change ☐ Addition D MEADOR, DAVID E NAME NAME STREET ADDRESS 2000 2ND AVE. STREET ADDRESS DETROIT, MI 48226 CITY-ST-ZIP 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Curtis T. Ranger, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

7/28/05

1-800-216-3338

Dayume Phone #

FILED