2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2005
Secretary of State

DOCUMENT# F98000007006

Entity Name: WAM HOLDINGS II, INC.

Current Principal Place of Business:

500 WOODWARD AVE
DETROIT, MI 48226

New Principal Place of Business:

Current Mailing Address:

C/O M. STILES
PO BOX 75000
DETROIT, MI 48275

New Mailing Address:

C/O M. STILES
PO BOX 75000, MC 3392
DETROIT, MI 48275

FEI Number: 38-3426903 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD ( ) Delete
Name: MOORADIAN, DENNIS
Address: 500 WOODWARD AVE., MC3364
City-St-Zip: DETROIT, MI 48226

Title: SVTD ( ) Delete
Name: YONKMAN, MARK W
Address: 500 WOODWARD AVE
City-St-Zip: DETROIT, MI 48226

Title: PD (X) Delete
Name: LEWIS, JOHN D
Address: 500 WOODWARD AVENUE
City-St-Zip: DETROIT, MI 482263384

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DVST (X) Change ( ) Addition
Name: GERSCH, NICOLE V
Address: 500 WOODWARD AVE., MC3392
City-St-Zip: DETROIT, MI 48226

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NICOLE V. GERSCH DVST 04/01/2005

Electronic Signature of Signing Officer or Director — Date