

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89444

Entity Name: PICO SOUTH, INC.

FILED
Jan 29, 2009
Secretary of State

Current Principal Place of Business:

27145 SHERATON DR
NOVI, MI 48377 US

New Principal Place of Business:

Current Mailing Address:

27145 SHERATON DR
NOVI, MI 48377 US

New Mailing Address:

FEI Number: 59-2490338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, ROBERT L JR
390 N ORANGE AVENUE SUITE 1500
ORLANDO, FL 32801 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: P, D () Delete
Name: WISNE, ALAN L
Address: 600 SAN MARCOS DRIVE
City-St-Zip: FT LAUDERDALE, FL 33301

Title: VP, D () Delete
Name: WISNE, LAWRENCE
Address: 27145 SHERATON DRIVE
City-St-Zip: NOVI, MI 483773318

Title: VP, D () Delete
Name: WISNE, JOSEPH
Address: 12280 DIXIE ROAD
City-St-Zip: REDFORD, MI 48239

Title: VP, D () Delete
Name: WISNE, TONI A
Address: 27145 SHERATON DRIVE
City-St-Zip: NOVI, MI 483773318

Title: ST () Delete
Name: THOM, BRIAN W
Address: 27145 SHECATON DR.
City-St-Zip: NOVI, MI 48377

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP, D (X) Change () Addition
Name: WISNE-SABINA, TONI A
Address: 27145 SHERATON DRIVE
City-St-Zip: NOVI, MI 483773318

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

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: ALAN L. WISNE

P

01/29/2009

Electronic Signature of Signing Officer or Director

Date