2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2012
Secretary of State

DOCUMENT# H05938

Entity Name: WADE TRIM, INC.

Current Principal Place of Business:

8745 HENDERSON RD
RENAISSANCE 5, STE 220
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

25251 NORTHLINE RD, PO BOX 10
TAYLOR, MI 48180 US

New Mailing Address:

FEI Number: 59-2417170 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRZEZINSKI, THOMAS S
8745 HENDERSON RD
RENAISSANCE 5, STE 220
TAMPA, FL 33634 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

OFFICERS AND DIRECTORS:

Title: CEO
Name: WATSON, DOUGLAS
Address: 500 GRISWOLD AVE, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: PD
Name: TYMOWSKI, FRANK
Address: 500 GRISWOLD AVE, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: VD
Name: BRZEZINSKI, THOMAS S
Address: 8745 HENDERSON RD, SUITE 220
City-St-Zip: TAMPA, FL 33634 US

Title: V
Name: GILDERSLEEVE, DAVID
Address: 8745 HENDERSON RD
City-St-Zip: TAMPA, FL 33634 US

Title: TS
Name: PICANO, RALPH
Address: 25251 NORTHLINE RD
City-St-Zip: TAYLOR, MI 48180

Title: VD
Name: COLEMAN, MARK
Address: 500 GRISWOLD AVE, SUITE 2500
City-St-Zip: DETROIT, MI 48226

I hereby 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 all other like empowered.

SIGNATURE: RALPH PICANO TREA 02/03/2012

Electronic Signature of Signing Officer or Director — Date