

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000002624

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** SCP 2004E-024, LLC

**Current Principal Place of Business:**

200 EAST LONG LAKE ROAD  
SUITE 180  
BLOOMFIELD HILLS, MI 48304

**New Principal Place of Business:**

**Current Mailing Address:**

200 EAST LONG LAKE ROAD  
SUITE 180  
BLOOMFIELD HILLS, MI 48304

**New Mailing Address:**

**FEI Number:** 74-3067178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** DAVIDSON, JEFFREY M  
**Address:** 200 EAST LONG LAKE RD SUITE 180  
**City-St-Zip:** BLOOMFIELD HILLS, MI 48304

**Title:** MGR  
**Name:** WHITE, KAREN  
**Address:** 2787 SYLVAN SHORES DR  
**City-St-Zip:** WATERFORD, MI 48328

**Title:** MGR  
**Name:** GURA, MARY LOU  
**Address:** 200 E LONG LAKE ROAD SUITE 180  
**City-St-Zip:** BLOOMFIELD HILLS, MI 48304 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** MARY LOU GURA

MGR

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date