

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002081

FILED
Jan 18, 2007
Secretary of State

Entity Name: WALTHER THREE RIVERS, LLC

Current Principal Place of Business:

52944 US 131
THREE RIVERS, MI 49093

New Principal Place of Business:

Current Mailing Address:

52944 US 131
THREE RIVERS, MI 49093

New Mailing Address:

FEI Number: 38-3639073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: WALTHER, DANIEL J
Address: 52944 US 131
City-St-Zip: THREE RIVERS, MI 49093

Title: MGRM () Delete
Name: WALTHER, DENNIS P
Address: 52944 US 131
City-St-Zip: THREE RIVERS, MI 49093

Title: MGRM () Delete
Name: WALTHER, DAVID M
Address: 52944 US 131
City-St-Zip: THREE RIVERS, MI 49093

Title: MGRM () Delete
Name: WALTHER, BRIAN J
Address: 52944 US 131
City-St-Zip: THREE RIVERS, MI 49093

Title: MGRM () Delete
Name: WALTHER, GARY W
Address: 52944 US 131
City-St-Zip: THREE RIVERS, MI 49093

Title: MGRM () Delete
Name: WALTHER, JASON M
Address: 52944 US 131
City-St-Zip: THREE RIVERS, MI 49093

ADDITIONS/CHANGES:

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

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

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

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

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 Chapter 119, Florida Statutes. I further 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: JASON WALTHER

MGR

01/18/2007

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