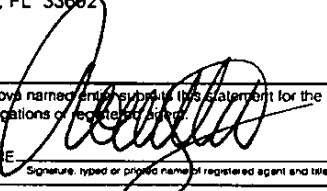
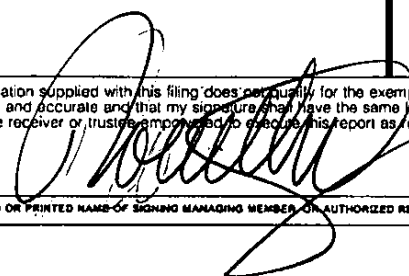


FILED
May 24, 2007 8:00 am
Secretary of State

05-01-2007 90322 035 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M05000002881		
1. Entity Name STENGEL SWANN ASSOCIATES, L.L.C.		
Principal Place of Business 3000 TOWN CENTER STE 540 SOUTHFIELD, MI 48075		Mailing Address 3000 TOWN CENTER STE 540 SOUTHFIELD, MI 48075
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent KASS, MICHAEL ESQ 1505 N. FLORIDA AVENUE TAMPA, FL 33602		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)		DATE 1/8/07
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WEISS, RONALD K 3000 TOWN CENTER STE 540 SOUTHFIELD, MI 48075	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
DO NOT WRITE IN THIS SPACE		
11: I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE		DATE 5/10/07 2483524044 Date Daytime Phone #