2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 24, 2007 8:00 am
Secretary of State
05-01-2007 90322 035 ****50.00

DOCUMENT # M05000002881

1. Entity Name
STENGEL SWANN ASSOCIATES, L.L.C.

Principal Place of Business	Mailing Address
3000 TOWN CENTER STE 540 SOUTHFIELD, MI 48075	3000 TOWN CENTER STE 540 SOUTHFIELD, MI 48075

DO NOT WRITE IN THIS SPACE

01042007No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-2788759
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KASS, MICHAEL ESQ
1505 N. FLORIDA AVENUE
TAMPA, FL 33602

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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 _____ 1/4/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	WEISS, RONALD K
STREET ADDRESS	3000 TOWN CENTER STE 540
CITY-ST-ZIP	SOUTHFIELD, MI 48075
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: X _____ 5/10/07 2483524544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #