

2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

**FILED**  
**Jan 07, 2008 08:00 AM**  
**Secretary of State**

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



01032008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

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

**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 reinstating)

DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75

U000000775591  
01/08/08-80031-018 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME WEISS, RONALD K  
STREET ADDRESS 3000 TOWN CENTER STE 540  
CITY- ST- ZIP SOUTHFIELD, MI 48075

TITLE  
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CITY- ST- ZIP

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CITY- ST- ZIP

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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

1.4.08

Date

(248)352-4544

Daytime Phone #