## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # M05000005926**

1. Entity Name

NORTH CONSTRUCTION SERVICES, L.L.C.



FILED Apr 10, 2007 08:00 A Secretary of State

Principal Place of Business

SIGNATURE:

Mailing Address

23800 WEST TEN MILE ROAD, SUITE 220 SOUTHFIELD, MI 48034

23800 WEST TEN MILE ROAD, SUITE 220 SOUTHFIELD, MI 48034



01052007 No Chg-LLC

CR2E083 (11/05)

Fee Required

Daytime Phone #

4. FEI Number		Applied For
38-3234175		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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	named entity submits this statement for the purpose of changing ions of registered agent.	ng its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)  OATE
Fi D	iling Fee Is \$50.00 ue by May 1, 2007	• • •
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COHEN, WALTER 23800 WEST TEN MILE ROAD, SUITE 220 SOUTHFIELD, MI 48034	U00000698118 04/18/07-80068-008 S0.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	
indicated	certify that the information supplied with this filing does not quit on this report is true and accurate and that my signature shall bility company or the receiver or trustee empowered to execut	alify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information I have the same legal effect as if made under oath; that I am a managing member or manager of the te this report as required by Chapter 608, Florida Statutes.

ED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE