

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000001857

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** W & C MANAGEMENT OF MICHIGAN, LLC

**Current Principal Place of Business:**

4321 OAKWOOD BLVD.  
MELVINDALE, MI 48122

**New Principal Place of Business:**

**Current Mailing Address:**

4321 OAKWOOD BLVD.  
MELVINDALE, MI 48122

**New Mailing Address:**

**FEI Number:** 38-3477629

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CROSS, WILLIAM  
2336 BAESEL VIEW  
ORLANDO, FL 32835 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  
**Name:** CROSS, WILLIAM  
**Address:** 2336 BAESEL VIEW  
**City-St-Zip:** ORLANDO, FL 32835

**Title:** MGRM  
**Name:** CROSS, CHARLES  
**Address:** 4321 OAKWOOD BLVD.  
**City-St-Zip:** MELVINDALE, MI 48122

I hereby 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:** WILLIAM A CROSS

MEMB

02/08/2011

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