

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000003224

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** MIE FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

3270 W. BIG BEAVER RD  
TROY, MI 48084

**New Principal Place of Business:**

**Current Mailing Address:**

3270 W. BIG BEAVER RD  
TROY, MI 48084

**New Mailing Address:**

C/O NFP, 500 W. MADISON STREET  
SUITE 2400  
CHICAGO, IL 60661

**FEI Number:** 26-4499446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** MGR  
**Name:** BIBLIOWICZ, JESSICA  
**Address:** 340 MADISON AVE 20TH FL  
**City-St-Zip:** NEW YORK, NY 10173

**Title:** MGR  
**Name:** HAMMOND, DOUGLAS  
**Address:** 340 MADISON AVE 20TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10173

**Title:** MGR  
**Name:** SCHECHTER, MARC  
**Address:** 3270 W. BIG BEAVER RD  
**City-St-Zip:** TROY, MI 48084

**Title:** MGR  
**Name:** ZIMMERMAN, JASON  
**Address:** 3270 W BIG BEAVER RD  
**City-St-Zip:** TROY, MI 48084

**Title:** MGR  
**Name:** SCHECHTER, ROBERT  
**Address:** 3270 W BIG BEAVER RD  
**City-St-Zip:** TROY, MI 48084

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:** BRETT SCHNEIDER

MGR

04/29/2010

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