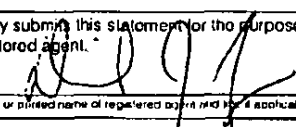
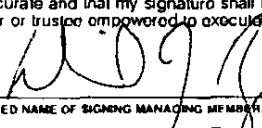


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 07, 2007 8:00 am
Secretary of State

04-09-2007 90350 033 ****50.00

DOCUMENT # M97000000338 1. Entity Name SUNDANCE PROPERTIES, L.L.C.					
Principal Place of Business 27777 FRANKLIN RD STE 200 SOUTHFIELD MI 48034			Mailing Address 27777 FRANKLIN RD STE 200 SOUTHFIELD MI 48034		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 38-3240595	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent FULLER, TERESA 5551 SW 18TH TERRACE BUSHNELL FL 33513				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 			DATE 3/29/07		
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM BAYER, DANIEL J 27777 FRANKLIN RD STE 200 SOUTHFIELD MI 48034	☐ Delete			
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR PETERMAN, BETSY 2915 NW 14TH STREET DELRAY BEACH FL 33445	☐ Delete			
TITLE NAME STREET ADDRESS CITY ST ZIP	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY ST ZIP	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY ST ZIP	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY ST ZIP	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 			Daniel J. Bayer, Managing Member		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			DATE 4/30/07		