

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 10, 1999 8:00am
Secretary of State

02-10-1999 90070 018 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P05889

1. Corporation Name
UNIPROP MANAGEMENT, INC.

Principal Place of Business

280 DAINES ST., STE. 300
BIRMINGHAM MI 48009-6250

Mailing Address

280 DAINES ST., STE. 300
BIRMINGHAM MI 48009-6250

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/03/1985

4. FEI Number

38-1941955

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RINES, MILTON
15235 TAMAMI TRAIL
FT MYERS FL 33908

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME ZLOTOFF, PAUL M.
STREET ADDRESS 280 DAINES ST., #300
CITY-ST-ZIP BIRMINGHAM MI

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE P
NAME ADLER, STEVEN P.
STREET ADDRESS 280 DAINES ST., #300
CITY-ST-ZIP BIRMINGHAM MI

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE VST
NAME KOSTER, GLORIA
STREET ADDRESS 280 DAINES ST #300
CITY-ST-ZIP BIRMINGHAM MI

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE V
NAME WINTER, TERRY J.
STREET ADDRESS 280 DAINES ST., #300
CITY-ST-ZIP BIRMINGHAM MI

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE AS
NAME ZUSSMAN, RICHARD
STREET ADDRESS 280 DAINES ST #300
CITY-ST-ZIP BIRMINGHAM MI 48009

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE EVP
NAME MARTZ, PETER J
STREET ADDRESS 280 DAINES ST - SUITE 300
CITY-ST-ZIP BIRMINGHAM MI 48009

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/99

Date

248 645-9220

Daytime Phone #

CR2E034 (11/98)