

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 17 1997 8:00am  
Secretary of State

DOCUMENT # P11259 (9)  
1. Corporation Name  
INDEPENDENCE ONE BROKERAGE SERVICES, INC.



Principal Place of Business Mailing Address  
27777 INKSTER ROAD 27777 INKSTER ROAD  
P.O. BOX 9065 MAIL CODE 10-53 P.O. BOX 9065 MAIL CODE 10-53  
FARMINGTON HILLS MI 48333-9065 FARMINGTON HILLS MI 48333-9065

|                                |  |                     |  |  |  |   |  |
|--------------------------------|--|---------------------|--|--|--|---|--|
| 2. Principal Place of Business |  | 2a. Mailing Address |  | 3. Date Incorporated or Qualified                                      |  | 3a. Date of Last Report   |  |
| 21 27777 Inkster Road          |  | 26 P.O. Box 9065    |  | 08/28/1986   |  | 03/15/1996  |  |
| Suite, Apt. #, etc.            |  | Suite, Apt. #, etc. |  | 4. FEI Number  |  | Applied For   |  |
| 22 Mail Code 10-98             |  | 27 Mail Code 10-98  |  | 38-2670726   |  | Not Applicable  |  |
| City & State                   |  | City & State        |  | 5. Certificate of Status Desired                                       |  | <input type="checkbox"/> \$8.75 Additional<br>Fee Required          |  |
| 23 Zip                         |  | 28 Zip              |  | 6. Election Campaign Financing   |  | <input type="checkbox"/> \$5.00 May Be<br>Added to Fees             |  |
| Country                        |  | Country             |  | 8. This corporation has liability for intangible tax under s. 199.032, |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 24 48334                       |  | 29 U.S.A.           |  | Florida Statutes   |  |   |  |

|  |  |  |  |   |  |  |  |
|--|--|--|--|---|--|--|--|
| 9. Name and Address of Current Registered Agent                          |  |  |  | 10. Name and Address of New Registered Agent          |  |  |  |
| CT CORPORATION SYSTEM<br>1200 S. PINE ISLAND ROAD<br>PLANTATION FL 33324 |  |  |  | 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                      |  |                    | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |  |  |
|----------------------------|----------------------|--|--------------------|---|--|--|--|
| TITLE                      | DP                   | <input type="checkbox"/> DELETE            | 1.1 TITLE          | D   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |
| NAME                       | KELLY, DEAN          |  | 1.2 NAME           | Kelly, Dean   |  |  |  |
| STREET ADDRESS             | 27777 INKSTER RD     |  | 1.3 STREET ADDRESS | 27777 Inkster Road                                    |  |  |  |
| CITY-ST-ZIP                | FARMINGTON HILLS MI  |  | 1.4 CITY-ST-ZIP    | Farmington Hills, MI 48334                            |  |  |  |
| TITLE                      | S                    | <input checked="" type="checkbox"/> DELETE | 2.1 TITLE          | S   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |
| NAME                       | ZIEMBIEC, SABRINA    |  | 2.2 NAME           | Schuster, Donald                                      |  |  |  |
| STREET ADDRESS             | 27777 INKSTER ROAD   |  | 2.3 STREET ADDRESS | 27777 Inkster Road                                    |  |  |  |
| CITY-ST-ZIP                | FARMINGTON HILLS MI  |  | 2.4 CITY-ST-ZIP    | Farmington Hills, MI 48334                            |  |  |  |
| TITLE                      | T                    | <input checked="" type="checkbox"/> DELETE | 3.1 TITLE          | T   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |
| NAME                       | MATTIA, GHAZWAN      |  | 3.2 NAME           | Beck, Anne  |  |  |  |
| STREET ADDRESS             | 27777 INKSTER ROAD   |  | 3.3 STREET ADDRESS | 27777 Inkster Road                                    |  |  |  |
| CITY-ST-ZIP                | FARMINGTON HILLS MI  |  | 3.4 CITY-ST-ZIP    | Farmington Hills, MI 48334                            |  |  |  |
| TITLE                      | D                    | <input checked="" type="checkbox"/> DELETE | 4.1 TITLE          | AS  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |  |  |
| NAME                       | JESKE, RONALD        |  | 4.2 NAME           | Heil, Debbie  |  |  |  |
| STREET ADDRESS             | 27777 INKSTER ROAD   |  | 4.3 STREET ADDRESS | 27777 Inkster Road                                    |  |  |  |
| CITY-ST-ZIP                | FARMINGTON HILLS MI  |  | 4.4 CITY-ST-ZIP    | Farmington Hills, MI 48334                            |  |  |  |
| TITLE                      | VP                   | <input type="checkbox"/> DELETE            | 5.1 TITLE          | DVP   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |
| NAME                       | KENNEDY, WILLIAM     |  | 5.2 NAME           | Kennedy, William                                      |  |  |  |
| STREET ADDRESS             | 27777 INKSTER ROAD   |  | 5.3 STREET ADDRESS | 27777 Inkster Road                                    |  |  |  |
| CITY-ST-ZIP                | FARMINGTON HILLS MI  |  | 5.4 CITY-ST-ZIP    | Farmington Hills, MI 48334                            |  |  |  |
| TITLE                      | D                    | <input checked="" type="checkbox"/> DELETE | 6.1 TITLE          | DP  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |  |  |
| NAME                       | BLACK, WILLIAM BRIAN |  | 6.2 NAME           | Badge, James  |  |  |  |
| STREET ADDRESS             | 27777 INKSTER ROAD   |  | 6.3 STREET ADDRESS | 27777 Inkster Road                                    |  |  |  |
| CITY-ST-ZIP                | FARMINGTON HILLS MI  |  | 6.4 CITY-ST-ZIP    | Farmington Hills, MI 48334                            |  |  |  |

14. I do 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.

SIGNATURE: Debbie Heil Debbie Heil, Assistant Secretary 4/9/97 (810) 473-3860  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #