2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 09, 2007 8:00 am Secretary of State DOCUMENT # P21920 1. Entity Name 04-09-2007 90083 020 ***150 00 BIG BEAVER DEVELOPMENT CORPORATION Mailing Address Principal Place of Business 3100 WEST BIG BEAVER 3100 WEST BIG BEAVER TROY, MI 48084 TROY, MI 48084 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3333 BEVERLY ROAD 3333 BEVERLY ROAD Suite, Apt. #, etc. Suite, Apt. #. etc. LAW DEPT. 03282007 CR2E034 (12/06) Chg-P 4. FEI Number Applied For City & State HOFFMAN EST., IL HOFFMAN EST., IL 38-2834722 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 60179 USA 60179 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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. Signature, typed or orinted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. **X**X Change TITLE ☐ Delete TITLE ☐ Addition NAME STOLLENWERCK, J. NAME 3333 BEVERLYRROAD STREET ADDRESS 3100 W. BIG BEAVER STREET ADDRESS HOFFMAN EST., IL 60179 CITY-ST-ZIP TROY, MI 48084 CITY-ST-ZIP AC ☐ Delete TITLE **KX** Change Addition BUCKLEY, A.I. NAME NAME 3000 W 14 MI RD ROYAL OAK, MI 48068-8073 3100 WEST BIG BEAVER STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TROY, MI 48084 CITY-ST-ZIP AT. **K** Change TITLE Delete TITLE ☐ Addition MISPLON, J L NAME NAME 3000 W 14 MILE RD 3100 W. BIG BEAVER ROAD STREET ADDRESS STREET ADDRESS ROYAL OAK, MI 48068-8073 CITY-ST-ZIP TROY, MI 48084 CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete THILE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an adachinent with an address, with all other like empowered.

FILED

SIGNATURE: JAMES L. MISPLON 4/02/07 248-463-1070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Days Trope of Date Days Trope of Date Date Days Trope of Days Tro