

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29198

FILED
Jan 05, 2007
Secretary of State

Entity Name: CRAIN ASSOCIATED ENTERPRISES, INC.

Current Principal Place of Business:

360 N MICHIGAN AVE
CHICAGO, IL 60601 US

New Principal Place of Business:

Current Mailing Address:

1155 GRATIOT AVE
DETROIT, MI 482072913 US

New Mailing Address:

FEI Number: 36-2637009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: CRAIN, MERRILEE P
Address: 360 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 606013806

Title: V () Delete
Name: MORROW, WILLIAM A.,
Address: 1155 GRATIOT AVE
City-St-Zip: DETROIT, MI 482072997

Title: CD () Delete
Name: CRAIN, KEITH E.,
Address: 1155 GRATIOT AVE
City-St-Zip: DETROIT, MI 482072997

Title: DP () Delete
Name: CRAIN, RANCE E.,
Address: 360 N. MICHIGAN AVE
City-St-Zip: CHICAGO, IL 606013806

Title: DT () Delete
Name: CRAIN, MARY KAY
Address: 1155 GRATIOT AVE
City-St-Zip: DETROIT, MI 482072997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM A. MORROW

V

01/05/2007

Electronic Signature of Signing Officer or Director

Date