2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Na	JMENT	# P3061	7		/		Jul 16, 2002 8:00 am Secretary of State 07-16-2002 90355 048 ***150.00				
Principal Place of Business 40500 VAN BORN ROAD CANTON MI 48188 US			Mailing Address C/O TAX DEPT 476 59 HALYARD DRIVE PLYMOUTH, MI 48170-2429			429	F INFICENCE AND WHILE NAME AND	: }	158 6) 818 10	BEBEL BLOKE INDE	
2. Principal 47603 H Suite, Apt	Place of Busin Halyard t. #, etc.	ness Drive	3. Mailing Address 47659 Halyard Drive Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State Plymouth, MI			c/o Legal Dept. City & State Plymouth, MI			4	. FEI Number 38-29354		A	pplied For ot Applicable	
Zip _48170	17.0		Zip 48170 egistered Agent		Country U.S.A.		. Certificate of Status Desired Name and Address of New	Fee	.75 Ad Require		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 8. The above named entity submits this statement for the purpose of changing its res					Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code						
9. This corporate filing	Signature, typed	or printed name of registered agent and ible to satisfy its Intangible and elects to do so.	FILE NOW!! After May 1, 200 Make Check Payab	Registered FEE I FEE I FEE W	Agent signar S \$150.	.00 550.00 It of State	n reinstating) 10. Election Campaign F Trust Fund Contribut	DATE inancing ion.	Added	0 May Be	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LINER, DA 21001 VAI TAYLOR M	AVID B. N BORN ROAD	□XI Delete	12. TITLE NAME STREET CITY-S	ADDRESS T-ZIP	Direct Grant	or & President H. Beard N Woodward Ave.	X	Change	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	40500 VAI CANTON I	THOMAS M N BORN ROAD MI 48188	□X Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP	Direct Todd R 39400	or & VP-Finance . Peters N Woodward Ave., ield Hills, MT 4	XI Suite 13	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	21001 VAN TAYLOR M	S, TIMOTHY N BORN ROAD II 48180	₩ Delete	TITLE NAME STREET CITY-S	ADDRESS	Vice P Willia 47659 Plymou	resident M. Lowe Halyard Drive th, MI 48170		Change	☐ Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	AS DORAN, D 21001 VAN TAYLOR M	n Born, RD	□ Delete	TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP		==	X	Change	Addition	
TITLE NAME Street Address City-St-Zip		D, LAWRENCE J. JR N BORN ROAD MI 48180	【X】Delete	TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP	Secreta R. Jeft 47659 I		K	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLE NAME STREET	ADDRESS	- ymuti	, 401/U		Change	☐ Addition	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NO THE DIFFER POLICE OR DIRECTOR

734-207-6200

CR2E034 (9/01)