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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P38927 (0)

1. Corporation Name

MICHIGAN LAKESHORE COMPANY



Principal Place of Business

P.O. BOX 4010
EAST LANSING MI 48826

Mailing Address

P.O. BOX 4010
EAST LANSING MI 48826

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 re-registering.)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME **FOOTE, KENNETH J.**
STREET ADDRESS **241 E. SAGINAW, #500**
CITY-ST-ZIP **EAST LANSING MI**

TITLE VD ☐ DELETE

NAME **FOOTE, FREDERICK C.**
STREET ADDRESS **241 E. SAGINAW, #500**
CITY-ST-ZIP **EAST LANSING MI**

TITLE ST ☐ DELETE

NAME **WELLMAN, TRACEY D.**
STREET ADDRESS **241 E. SAGINAW, #500**
CITY-ST-ZIP **EAST LANSING MI**

TITLE DV ☒ DELETE

NAME **FOOTE, DAVE R**
STREET ADDRESS **241 E. SAGINAW, #500**
CITY-ST-ZIP **EAST LANSING MI**

TITLE DC ☒ DELETE

NAME **IMESON, ROGER W**
STREET ADDRESS **241 E. SAGINAW, #500**
CITY-ST-ZIP **EAST LANSING MI**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice President ☒ Change ☐ Addition

1.2 NAME **Kenneth J. Foote**

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE President, Director ☒ Change ☐ Addition

2.2 NAME **Frederick C. Foote**

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Vice President ☐ Change ☒ Addition

6.2 NAME **David C. Werth**

6.3 STREET ADDRESS **241 E. Saginaw St #500**
6.4 CITY-ST-ZIP **East Lansing MI 48823**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/96 517-337-1373

Date

Daytime Phone #

CR2E034 (12/95)