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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 21 1998 8:00am Secretary of State

DOCUMENT # P40218 (0) **OLDE PROPERTY CORPORATION** Principal Place of Business Mailing Address ATTN: TAX DEPT. ATTN: TAX DEPT. 131 WEST LAFAYETTE 131 WEST LAFAYETTE DETROIT MI 48226 DETROIT MI 48226 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/21/1992 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 38-3050688 26 Not Applicable 21 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 25 30 Personal Property Tax due June 30. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 81 Name 1200 S. PINE ISLAND RD. B2 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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 reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETÉ 1.1 TITLE TITLE OLDE, ERNEST J. NAME 1.2 NAME CR2E034 131 W. LAFAYETTE STREET ADDRESS 1.3 STREET ADDRESS **DETROIT MI** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE MUDGE, RANDAL J. NAME 2.2 NAME 131 W. LAFAYETTE STREET ADDRESS 2.3 STREET ADDRESS **DETROIT MI** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE KROHN, HARVEY R. 3.2 NAME 131 W. LAFAYETTE STREET ADORESS 3.3 STREET ADDRESS DETROIT MI CITY-ST-ZIP 3.4. CITY - ST-ZIP TITLE DELETE 4.1 TITLE Change Addition SLOPEN, JEFFREY M. NAME 4.2 NAME 131 W. LAFAYETTE STREET ADDRESS 4.3 STREET ADDRESS **DETROIT MI** CITY-ST-ZIP 4.4 CITY - ST - ZIP Secretary DELETE Change Addition TITLE 5.1 TITLE REED, JULIE D. Fildes, Lisa S. 131 W. Lafayette Detroit, MI 48226 NAME 5.2 NAME 131 W. LAFAYETTE STREET ADDRESS 5.3 STREET ADDRESS **DETROIT MI** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE SUTTON, MACK H. 6.2 NAME NAME 131 W. LAFAYETTE STREET ADDRESS 6.3 STREET ADDRESS **DETROIT MI** CITY-ST-ZIP 64 CITY-ST-ZIP

14. 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 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 trusted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address.

CICNIATURE.

1/4/90

313-961-6616