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

Mailing Address

P.O. BOX 9065

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000052291

1. Corporation Name

RIMCO XIV, INC.

Principal Place of Business

27777 INKSTER ROAD

CITY-ST-ZIP

SIGNATURE:

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90135 023 ***150.00

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FARMINGTON HILLS MI 48333-9065 US		FARMINGTON HILLS MI 48333-9065		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
		Transport in the total and the total					
					07/06/1995		ļ
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	7	Applied For
21	26			62-1618314		1	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	uite, Apt. #, etc.		5. Certificate of Status Desired		Additional
22					J. Certificate of Status Desired	Fee F	Required
City & State	9	City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip Country			8. This corporation owes the current year Intangible Personal Property Tax.		
48334	-5326 25	29 30	o		Personal Property Tax.	☐Yes	AT No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	Agent	
WEIG	POLED DODERT I		81	Name			
WEISSLER, ROBERT I				Street	Street Address (P.O. Box Number is Not Acceptable)		
2200 MUSEUYM TOWER							
150 W. FLAGLER STREET			83				
MIAN	II FL 33130		84	City		85 Zir	Code
				,	FL		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named	corporation submits this statement for the purpose of	changing i	ts registered
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was autrons of, Section 607.0505, Florida	ionzed by a Statutes	ine corpi i.	oration's board of directors. I hereby accept the appoin	Wiferit as i	egistored
	, , , , , , , , , , , , , , , , , , ,						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Age	nt signature r	required when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	DS	☐ DELETE	1.1 TITLE			XX Change	Addition
NAME	BROWN, ROBERT C		1.2 NAME				
STREET ADDRESS	27777 INKSTER ROAD		1.3 STREE	TADDRESS	Farmington Hills, MI 48334		
CITY-ST-ZIP	FARMINGTON HILLS MI 48333		1.4 CITY-S	T-ZIP			
TITLE	DP	☐ DELETE	2.1 TITLE		:	xix Change	Addition
NAME	HENSON, JEROME		2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS	Farmington Hills, MI 48334		ļ
CITY-ST-ZIP	FARMINGTON HILLS MI 48333		2. 4 CITY-5	ST-ZIP			
TITLE	DT	☐ DELETE	3.1 TITLE		:	XX Change	Addition
NAME (RUTLAND, TIMOTHY		3.2 NAME				ţ
STREET ADORESS	27777 INKSTER ROAD		3.3 STREE	T ADDRESS	Formington Hills MI (922)		
CITY-ST-ZIP	FARMINGTON HILLS MI 48333		3.4. CITY-5	ST-ZIP	Farmington Hills, MI 48334		
TITLE		☐ DELETE	4.1 TITLE		VP	Change	Addition
NAME			4. 2 NAME		DEBORAH HEIL		
STREET ADDRESS		,	4.3 STREE	T ADDRESS	27777 INKSTER ROAD		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	FARMINGTON HILLS, MI 48334	+	
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME		į		
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE	·		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			}

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 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, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HATURE REQUIRED Date 4-26-99 (248) 473-3076

CR2E034 (11/98)

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<u>'≣':"</u>