

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000005916

**FILED**  
**Apr 08, 2013**  
**Secretary of State**  
**CC6461968559**

**Entity Name:** HARLEY ELLIS DEVEREAUX CORPORATION

**Current Principal Place of Business:**

26913 NORTHWESTERN HWY, STE 200  
SOUTHFIELD, MI 48033-3476

**Current Mailing Address:**

26913 NORTHWESTERN HWY, STE 200  
SOUTHFIELD, MI 48033-3476 US

**FEI Number:** 38-2645558

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title SECRETARY, DIRECTOR  
Name COOPER, MICHAEL F  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033

Title CEO, CHAIRMAN, DIRECTOR  
Name SKOG, GARY L  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033

Title DIRECTOR  
Name ESSIQUE, ERIC G  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033

Title PRESIDENT, TREASURER, DIRECTOR  
Name DEVEREAUX, J. PETER  
Address 601 SOUTH FIGUEROA STREET, STE 500  
City-State-Zip: LOS ANGELES CA 90017

Title DIRECTOR  
Name ENRIQUE, SUAREZ  
Address 401 WEST SUPERIOR  
City-State-Zip: CHICAGO IL 60610

Title DIRECTOR  
Name VAN HERLE, TANIA L  
Address 601 SOUTH FIGUEROA STREET, STE 500  
City-State-Zip: LOS ANGELES CA 90017

Title DIRECTOR  
Name HALL, C. RICHARD  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033-3476

Title DIRECTOR  
Name SMITH, ARTHUR F  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033-3476

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*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL F COOPER**

**SECRETARY**

**04/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name CORSIGLIA, JAMES A  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033-3476

Title DIRECTOR  
Name JAEGER, DAVID M  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033-3476

Title DIRECTOR  
Name HARTMAN, A. LOUIS  
Address 26913 NORTHWESTERN HWY, STE 200  
City-State-Zip: SOUTHFIELD MI 48033-3476

Title DIRECTOR  
Name DALE, JOHN R  
Address 601 SOUTH FIGUEROA STREET  
SUITE 500  
City-State-Zip: LOS ANGELES CA 90017