

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005154

Entity Name: GAIL & RICE, INC.**Current Principal Place of Business:**30700 NORTHWESTERN HWY
FARMINGTON HILLS, MI 48334**Current Mailing Address:**30700 NORTHWESTERN HWY
FARMINGTON HILLS, MI 48334 US**FEI Number:** 38-1305119**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR., SUITE A
TALLAHASSEE, FL 32301 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 CHAIRMAN, DIRECTOR
Name RICE, TIM
Address 6360 COMMERCE ROAD
City-State-Zip: ORCHARD LAKE MI 48324

Title SECRETARY AND TREASURER
Name POZOLO, GARY T
Address 3792 PIERCE DRIVE
City-State-Zip: SHELBY TWP MI 48316

Title DIRECTOR
Name RICE, MARCELLE
Address 6360 COMMERCE ROAD
City-State-Zip: ORCHARD LAKE MI 48324

Title DIRECTOR
Name HYSNI, BLAIR
Address 7261 WOODLORE
City-State-Zip: WEST BLOOMFIELD MI 48323

Title DIRECTOR
Name SCHROEDER, ROBERT
Address 286 TOURAINE ROAD
City-State-Zip: GROSSE POINTE FARMS MI 48236

Title DIRECTOR
Name ZADORA, ROBERT
Address 1917 PELICAN COURT
City-State-Zip: TROY MI 48084

Title PRESIDENT
Name MACLEAN, JEFFREY
Address 30700 NORTHWESTERN HWY
City-State-Zip: FARMINGTON HILLS MI 48334

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: LINDA HUMPHREY**PAYROLL DIRECTOR****04/23/2018**

Electronic Signature of Signing Officer/Director Detail

Date