## **2020 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 Title SECRETARY AND TREASURER

NameRICE, TIMNamePOZOLO, GARY TAddress6360 COMMERCE ROADAddress3792 PIERCE DRIVECity-State-Zip:ORCHARD LAKE MI 48324City-State-Zip:SHELBY TWP MI 48316

TitleDIRECTORTitleDIRECTORNameRICE, MARCELLENameHYSNI, BLAIR

Address 6360 COMMERCE ROAD Address 7261 WOODLORE

City-State-Zip: ORCHARD LAKE MI 48324 City-State-Zip: WEST BLOOMFIELD MI 48323

Title DIRECTOR Title DIRECTOR

NameSCHROEDER, ROBERTNameZADORA, ROBERTAddress286 TOURAINE ROADAddress1917 PELICAN COURT

City-State-Zip: GROSSE POINTE FARMS MI 48236 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 03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 18, 2020

**Secretary of State** 

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