

2016 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**FEI Number:** 38-1305119**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	C
Name	RICE, TIM
Address	30700 NORTHWESTERN HWY
City-State-Zip:	FARMINGTON HILLS MI 48334

Title	P
Name	BOUCHARD, JEFF
Address	30700 NORTHWESTERN HWY
City-State-Zip:	FARMINGTON HILLS MI 48334

Title	S
Name	RICE, LAURA
Address	30700 NORTHWESTERN HWY
City-State-Zip:	FARMINGTON HILLS MI 48334

Title	T
Name	RICE, AL
Address	30700 NORTHWESTERN HWY
City-State-Zip:	FARMINGTON HILLS MI 48334

Title	CFO
Name	POZOLO, GARY T
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: GARY T POZOLO

CFO

07/28/2016

Electronic Signature of Signing Officer/Director Detail_____
Date