

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000001004

**Entity Name:** BUFFALO BILLS, INC.**Current Principal Place of Business:**63 KERCHEVAL AVE SUITE 200  
GROSSE POINTE FARMS, MI 48236**Current Mailing Address:**63 KERCHEVAL AVE SUITE 200  
GROSSE POINTE FARMS, MI 48236**FEI Number: 16-1035845****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEMS  
1200 S PINE ISLAND RD  
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	TREASURER, VP, & DIRECTOR
Name	LITTMAN, JEFFREY C
Address	63 KERCHEVAL AVE SUITE 200
City-State-Zip:	GROSSE POINTE FARMS MI 48236

Title	PRESIDENT & DIRECTOR
Name	WILSON, MARY M
Address	63 KERCHEVAL AVE SUITE 200
City-State-Zip:	GROSSE POINTE FARMS MI 48236

Title	SECRETARY, VP, DIRECTOR
Name	OWEN, MARY M
Address	63 KERCHEVAL AVE SUITE 200
City-State-Zip:	GROSSE POINTE FARMS MI 48236

*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: JEFFREY C. LITTMANN****TREASURER****04/22/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date