2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003128

Address:

City-St-Zip:

3650 WEST LIBERTY ROAD

ANN ARBOR, MI 48103

FILED Jul 05, 2006 Secretary of State

00011		000000120		ocorciary or otate	
Entity Na	me: BCN SEF	RVICES GREAT LAKES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ST LIBERTY ROOR, MI 48103	DAD			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ST LIBERTY RO OR, MI 48103	DAC			
FEI Number	: 38-3440936	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
PENINSULA REGISTERED AGENTS, INC. 20 S. BISCAYNE BLVD., SUITE 4874 MIAMI, FL 33131 US			1200 S. PINE ISLAND	CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US	
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: CLAUDIA SAARI				07/05/2006	
	Electror	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () HOULE, GARY 3650 WEST LII ANN ARBOR, M	BERTY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () HANS, ANDREN 3650 WEST LII ANN ARBOR, N	BERTY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST () STRIPP, GARR) Delete ETT R	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANDREW C HANS P 07/05/2006