

			Form Revision Date 07/201
	ANNU	JAL STATEMENT	
	(Required by Sect	tion 207, Act 23, Public Act of 1993)	
Identification Number:		802352086	
Annual Statement Filing Yea	ar: 2021		
1. Limited Liability Company	Name:		
ANDERSON APARTMENTS	S, LLC		
The street address of the Resident Agent Name:	e limited liability company's regist THOMAS W. BREAKEY	ered office and name of the residen	nt agent at that office:
Street Address:Apt/Suite/Other:	321 WOODLAND PASS STE 100		
City:	EAST LANSING		
State:	MI	Zip Code: 48823	
 Mailing address of the re P.O. Box or Street Address: Apt/Suite/Other: 	egistered office:		
City: State:		Zip Code:	
This annual statement mus	t be signed by a member, manage	er, or an authorized agent.	
Signed this 9th Day of Febr	ruary, 2021 by:		
Signature		Title	Title if "Other" was selected
Thomas W Breakey		Member	
		onic document is being signed in acc s true, accurate, and in compliance	cordance with the Act. I further certify with the Act.
	1 r	Decline j Accept	

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS FILING ENDORSEMENT

This is to Certify that the 2021 ANNUAL STATEMENT

for

ANDERSON APARTMENTS, LLC

ID Number: 802352086

received by electronic transmission on February 09, 2021 , is hereby endorsed.

Filed on February 09, 2021 , by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 9th day of February, 2021.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau