



Form Revision Date 07/2016

## ANNUAL REPORT

For use by DOMESTIC NONPROFIT CORPORATION

(Required by Section 911, Act 162, Public Act of 1982)

The identification number assigned by the Bureau is: 800932208

Annual Report Filing Year: 2021

1. Corporation Name:  
UPPER PENINSULA CLIMBERS COALITION

2. The street address of the corporation's registered office and the name of the resident agent at that office:

1. Resident Agent Name: WILLIAM THOMPSON

2. Street Address: 514 N THIRD ST  
Apt/Suite/Other:  
City: MARQUETTE  
State: MI Zip Code: 49855

3. Mailing address of the corporation's registered office:  
P.O. Box or Street Address: 514 N THIRD  
Apt/Suite/Other:  
City: MARQUETTE  
State: MI Zip Code: 49855

5. Provide the names and business or residence addresses of the corporation's board of directors and its president, treasurer, and secretary:

Title	Name	Residence or Business Address
PRESIDENT	JOHN MILLER	1500 PETTIBONE LAKE, HIGHLAND, MI 48356 USA
TREASURER	BILL THOMPSON	127 E CRESCENT, MARQUETTE, MI 49855 USA
SECRETARY	KELLY LAAKSO	1590 BIRCH, MARQUETTE, MI 49855 USA
DIRECTOR	KAMILA FASSBENDER	232 BLEMHUBER AVE, MARQUETTE, MI 49855 USA
DIRECTOR	BRIAN WIESNER	721 W WATER ST, HANCOCK, MI 49930 USA
DIRECTOR	PAUL DEMAY	727 SARATOGA ST., KINGSFORD, MI 49802 USA
DIRECTOR	BRYAN DEAugustine	245 TIMBER LN, MARQUETTE, MI 49855 USA
DIRECTOR	BRANDON SYNDER	19 STONEGATE HTS, MARQUETTE, MI 49855 USA

6. Describe the purposes and general nature and kind of business in which the corporation engaged in during the year covered by this report:  
THE UPPER PENINSULA CLIMBERS COALITION IS A NONPROFIT ADVOCACY GROUP DEDICATED TO CREATING AND PRESERVING SUSTAINABLE AND RESPONSIBLE CLIMBING IN MARQUETTE COUNTY AND THE SURROUNDING AREAS OF MICHIGAN'S UPPER PENINSULA.

Signed this 2nd Day of December, 2021 by:

Signature	Title	Title if "Other" was selected
William Thompson	Treasurer	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline       Accept

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**

**FILING ENDORSEMENT**

***This is to Certify that the*** 2021 ANNUAL REPORT

***for***

UPPER PENINSULA CLIMBERS COALITION

***ID Number:*** 800932208

***received by electronic transmission on*** December 02, 2021 ***, is hereby endorsed.***

***Filed on*** December 02, 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 2nd day of December, 2021.***

*Linda Clegg*

***Linda Clegg, Director***

***Corporations, Securities & Commercial Licensing Bureau***