

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
PROFIT CORPORATION ANNUAL REPORT

2021



Due May 15, 2021

File Online at [www.michigan.gov/corppfileonline](http://www.michigan.gov/corppfileonline)

Identification Number <b>800700052</b>	Corporation Name <b>CLOVERS COLLISION CENTER, INC.</b>
Resident agent name and mailing address of the registered office  <b>DIANE REECE 17285 STEPHENS EASTPOINTE, MI 48021</b>	
<p><b>FILED</b></p> <p><b>APR 05 2021</b></p> <p>CORPORATIONS DIVISION</p>	
The address of the registered office <b>17285 STEPHENS EASTPOINTE, MI 48021</b>	

TranInfo:2 24580884-1 02/1/21  
Chk#: 19520 Amt: \$25.00  
ID: 800700052

IF NO CHANGE in the address of the registered office and/or resident agent proceed to Item 4.

1 Change mailing address of registered office in MICHIGAN (can be a P O Box)	2 Change resident agent																				
3 Change the address of the registered office in MICHIGAN (cannot be a P O Box)																					
4 Describe the general nature and kind of business in which the corporation engaged in during the year covered by this report (REQUIRED) <b>COLLISION AND MECHANICAL REPAIRS</b>																					
5 NAME and BUSINESS OR RESIDENCE ADDRESS of officers and directors (REQUIRED)																					
	<table border="1"> <thead> <tr> <th>Name</th> <th>Address</th> <th>City</th> <th>State</th> <th>Zip Code</th> </tr> </thead> <tbody> <tr> <td>President <b>MICHAEL J SEGER</b></td> <td><b>17285 STEPHENS</b></td> <td><b>EASTPOINTE</b></td> <td><b>MI</b></td> <td><b>48021</b></td> </tr> <tr> <td>Secretary (If different than president) <b>DIANE C REECE</b></td> <td><b>17285 STEPHENS</b></td> <td><b>EASTPOINTE</b></td> <td><b>MI</b></td> <td><b>48021</b></td> </tr> <tr> <td>Treasurer (If different than president)</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Name	Address	City	State	Zip Code	President <b>MICHAEL J SEGER</b>	<b>17285 STEPHENS</b>	<b>EASTPOINTE</b>	<b>MI</b>	<b>48021</b>	Secretary (If different than president) <b>DIANE C REECE</b>	<b>17285 STEPHENS</b>	<b>EASTPOINTE</b>	<b>MI</b>	<b>48021</b>	Treasurer (If different than president)				
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If different than Officers	Director																				
	Director																				
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6 Signature of authorized officer or agent <b>X Diane C Reece</b>	Title <b>VP</b>	Date <b>2-4-21</b>	Phone (Optional) <b>586-498-9097</b>																		

Filing Fee: \$25.00  
Report due May 15, 2021.  
If received by agency after May 15, penalty fees will be assessed.

Submit

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Mail: Return completed report with a check or money order payable to the State of Michigan to Corporations Division, P O Box 30702, Lansing, MI 48909 (517) 241-6470

If more space is needed, additional pages may be included. Do not staple any items to the report. Required by Section 911, 1972 PA 284, as amended. Failure to file this report may result in the dissolution of the corporation. Late filing will result in penalty fees.