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CSCL/CD-2500pc (01/22)

## DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS PROFIT CORPORATION ANNUAL REPORT

2022

|--|--|--|

| Due | Mav    | 15  | 2022 | Fil |
|-----|--------|-----|------|-----|
| Duc | iviciy | 10, | 2022 |     |

le Online at www.michigan.gov/corpfileonline

Corporation Name Identification Number KENNETH R. BURCH, SR., P.C. 800972667 Resident agent name and mailing address of the registered office TranInfo:2 25018688-1

> **KENNETH R BURCH SR 295 W HURON** PONTIAC, MI 48341

Ant: 425.00

The address of the registered office

**295 W HURON** PONTIAC, MI 48341

|  | To certify | there are <b>NO CHANGES</b> from the previously filed report, <b>cl</b> No other sections can be completed if box is checked and | heck this box and PROCEED TO ITEM 6 fo |
|--|------------|--|--|
| $ldsymbol{ld}}}}}}}}}$ | signature  | No other sections can be completed if box is checked and   | d shareholder list is not required     |

| 1 Change mailine   | g 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 ( <u>cannot</u> 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) |   |                         |  |  |  |
| 5 NAME and BUSINESS OR RESIDENCE ADDRESS of officers and directors. (REQUIRED - Print legible and complete names and addresses)          |   |                         |  |  |  |
| -  | President   |                         |  |  |  |
| REQUIRED Secretary (If different than president)   |   |                         |  |  |  |
|  | Treasurer (If different than president)                       |                         |  |  |  |
|  | Director  |                         |  |  |  |
| If<br>different  | Director  |                         |  |  |  |
| than<br>Officers   | Director  |                         |  |  |  |
|  | Director  |                         |  |  |  |
| 6 Signature of all   | thorized officer or agent Title Dat                           | Phone (Optional)        |  |  |  |

Filing Fee: \$25.00

Report due May 15, 2022.

If received by agency after May 15, penalty fees will be assessed.

Online www michigan.gov/corpfileonline

Save time by filing online You will get an immediate response and you can elect to receive future notices by email to the resident agent. The agent will also be sent an email when a document is filed, or a CID/PIN is requested You will need your Customer ID number (CID) and PIN, which can be obtained using the CID/PIN recovery page at www.michigan.gov/corppin

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