

SCC eFile

2016 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

216513797

1.) CORPORATION NAME:

**Universal Warranty Corporation**

DUE DATE: **3/31/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1414483**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MI**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 Woodward Ave., 14th Floor

CITY/ST/ZIP: Detroit, MI 48226

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KERRI KOELLNER		
TITLE:	PRESIDENT		
ADDRESS:	300 GALLERIA OFFICENTRE		
CITY/ST/ZIP/CO:	SOUTHFIELD, MI 48034		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DOUGLAS TIMMERMAN		
TITLE:	PRESIDENT		
ADDRESS:	300 GALLERIA OFFICENTRE		
CITY/ST/ZIP/CO:	STE 201 SOUTHFIELD, MI 48034		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROBERT NOACK		
TITLE:	ASST SECRETARY		
ADDRESS:	300 GALLERIA OFFICENTRE		
CITY/ST/ZIP/CO:	SOUTHFIELD, MI 48034		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CATHY L QUENNEVILLE		
TITLE:	SECRETARY		
ADDRESS:	200 RENAISSANCE CENTER		
CITY/ST/ZIP/CO:	482-B09 C24 DETROIT, MI 48265-2000		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BARBARA TAYLOR		
TITLE:	ASST SECRETARY		
ADDRESS:	200 RENAISSANCE CENTER		
CITY/ST/ZIP/CO:	9TH FLOOR DETROIT, MI 48265		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ BARBARA TAYLOR</u>	<u>BARBARA TAYLOR, ASST</u>	<u>4/15/2016</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.