No. <b>W 22554</b>		Due no later than Feb 28, 2010			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CT CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.  CAB WEST LLC THERESE FALETTI ONE AMERICAN ROAD WHQ ROOM 612 DEARBORN MI 48126 USA		d.	1111 W JEFFERSON STE 530 SUITE 530 BOISE ID 83702 USA  3. New Registered Agent Signature:*			
4. Limited Liability Companies:	Enter Nan	nes and Addresses	of at least one Member or Manager.					
Office Held Nar	ne		Street or PO Address		City	State	Country	Postal Code
MANAGER SUS	SCOTT KROHN SUSAN J THOMAS JANE CARNARVON		ONE AMERICAN RD ONE AMERICAN RD ONE AMERICAN ROAD		DEARBORN DEARBORN DEARBORN	MI MI MI	USA USA USA	48216 48216 48126-2701
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 22554		Signature: Christopher Hall			Date: 02/09/2010			
		Name (type or print): Christopher Hall			Title: Assistant Secretary			
Processed 02/09/2010 * Electronically provided signatures are accepted as original signatures.								