FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-028'
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0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Street) SOUTHFIELD MI		11	48034										Line	X Form	filed by One R filed by More t		
(City)	(5	•	(Zip)	n-Deriv	ative	Sec	rurities	s Acc	nuired D	isnosed	of o	· Ren	eficial	ly Owner	<u> </u>		
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					action	2A. Deemed Execution Date,			3. Transact Code (Ins	4. Section Dispositr. 5)	urities A sed Of (I	ities Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amou Securitie Benefici	nt of 6. es Fo (D)	rm: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		7							uired, Dis , options		of, or I	3ene			and 4)		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisable	Expiration Date	Title		Amount or Number of Shares				
Phantom Stock ⁽¹⁾	(2)	02/23/2005			Α		6,250		05/10/2007	05/10/200	7 Com		6,250	(3)	6,250	D	

Explanation of Responses:

- 1. Payable only in cash.
- 2. 1-for-1
- 3. Not applicable. Granted to reporting person as compensation.

Brian W. Fannon

02/25/2005

** Signature of Reporting Person

Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.