2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849177

Entity Name: CBCA ADMINISTRATORS, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4150 INTERNATIONAL PLAZA. 250 CIVIC CENTER DRIVE

SUITE #550 SUITE #350

FT WORTH, TX 76109 US COLUMBUS, OH 43215 US

Current Mailing Address: New Mailing Address:

4150 INTERNATIONAL PLAZA. SUITE #550 FT WORTH, TX 76109 US

FEI Number: 23-2176124 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: V (X) Change () Addition

Name: NAPIER, RODNEY Name: NAPIER, RODNEY

Address: 250 E. BROAD ST 21ST FLOOR Address: 250 CIVIC CENTER DRIVE, STE: 350

City-St-Zip: COLUMBUS, OH 43215 US City-St-Zip: COLUMBUS, OH 43215 US

Title: DCEO () Delete Title: DCEO (X) Change () Addition

Name: DIBELLA, KEN Name: DIBELLA, KEN

Address: 250 E BROAD ST, 21ST FLOOR Address: 250 CIVIC CENTER DRIVE, STE: 350

City-St-Zip: COLUMBUS, OH 43215 City-St-Zip: COLUMBUS, OH 43215

Title: S () Delete Title: () Change () Addition

 Name:
 FACIANE, LAUREL
 Name:

 Address:
 4150 INTERNATIONAL PLAZA STE 550
 Address:

 City-St-Zip:
 FORT WORTH, TX 76109
 City-St-Zip:

Title: () Delete Title: CFO () Change (X) Addition

Name: ROWLAND, BILL

Address: Address: 250 CIVIC CENTER DRIVE, STE: 350

City-St-Zip: City-St-Zip: COLUMBUS, OH 43215

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAUREL FACIANE S 04/15/2009