2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002107

Entity Name: ADVANCED HANDLING SYSTEMS OF OHIO, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4861 DUCK CREEK ROAD CINCINNATI, OH 45227 **Current Mailing Address: New Mailing Address:** 4861 DUCK CREEK ROAD CINCINNATI, OH 45227 FEI Number: 31-1141273 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: () Delete () Change () Addition FRANK, CHUCK Name: Name: 4861 DUCK CREEK ROAD Address: Address: City-St-Zip: CINCINNATI, OH 45227 City-St-Zip: VΡ Title: Title: () Delete () Change () Addition Name: MILLER, JEFF Name: 4861 DUCK CREEK ROAD Address: Address: CINCINNATI, OH 45227 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition FRANK, KATHY A Name: Name: 4861 DUCK CREEK ROAD Address: Address: City-St-Zip: CINCINNATI, OH 45227 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition TAVEL, DAVE Name: Name: Address: 4861 DUCK CREEK ROAD Address: City-St-Zip: CINCINNATI, OH 45227 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BLAKE, KELLY K Name:

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.

Address:

City-St-Zip:

SIGNATURE: KATHY A. FRANK VP 01/19/2009

4861 DUCK CREEK ROAD

CINCINNATI, OH 45227

Address: City-St-Zip: