## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000006109

MCVAY, TOM D

COLUMBUS, OH 43229

1105 SCHROCK ROAD, SUITE 206

Name:

Address:

City-St-Zip:

Entity Name: MAS DEVELOPMENT CORPORATION OF OHIO

FILED Apr 16, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1105 SCHROCK ROAD, SUITE 206 COLUMBUS, OH 43229 **Current Mailing Address: New Mailing Address:** 1105 SCHROCK ROAD, SUITE 206 COLUMBUS, OH 43229 FEI Number: 56-2408942 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: WINTERS, ELISE K 1006 DREW STREET CLEARWATER, FL 33755 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: ( ) Delete () Change () Addition WHALEY, RICHARD J Name: Name: 1105 SCHROCK ROAD, SUITE 206 Address: Address: City-St-Zip: COLUMBUS, OH 43229 City-St-Zip: Title: DVS Title: DVS () Delete (X) Change ( ) Addition DEAN, DENNIS DEAN, DENNIS Name: Name: 1105 SCHROCK ROAD, SUITE 206 601 CLEVELAND STREET STE 820 Address: Address: COLUMBUS, OH 43229 CLEARWATER, FL 33755 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition DV ( ) Delete DV

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.

Name:

Address:

City-St-Zip:

MCVAY, TOM D

601 CLEVELAND STREET STE 820

CLEARWATER, FL 33755

SIGNATURE: RICHARD J WHALEY PRES 04/16/2008