

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # F94000002905 (7)**  
1. Corporation Name

**EXCELLENCE IN MOTIVATION, INC.**



Principal Place of Business: **6 NORTH MAIN ST., STE. 370 DAYTON OH 45402**  
Mailing Address: **6 NORTH MAIN ST., STE. 370 DAYTON OH 45402**

3. Date Incorporated or Qualified: **06/03/1994**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **31-1387432**  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

9. Name and Address of Current Registered Agent:  
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST., STE. 105  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent:  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature typed or printed below of principal agent and State Tax Authority (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	11 TITLE	
NAME	THOMAS, JARRETT N	12 NAME	
STREET ADDRESS	1300 BRITTANY HILLS DR.	13 STREET ADDRESS	
CITY-ST-ZIP	DAYTON OH 45459	14 CITY-ST-ZIP	
TITLE	S	21 TITLE	
NAME	SEBALY, JON	22 NAME	
STREET ADDRESS	31 WALNUT LANE	23 STREET ADDRESS	
CITY-ST-ZIP	DAYTON OH 45419	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	
NAME	KUKER, RONALD	32 NAME	
STREET ADDRESS	1114 GREEN TREE DR.	33 STREET ADDRESS	
CITY-ST-ZIP	DAYTON OH 45429	34 CITY-ST-ZIP	
TITLE	VD	41 TITLE	
NAME	PLUMMER, JAMES	42 NAME	
STREET ADDRESS	500 BRUTON CIRLCE	43 STREET ADDRESS	
CITY-ST-ZIP	KEETERING OH	44 CITY-ST-ZIP	
TITLE	VD	51 TITLE	
NAME	SMITH, HOWARD	52 NAME	
STREET ADDRESS	471 ROSELAKE DRIVE	53 STREET ADDRESS	
CITY-ST-ZIP	CENTERVILLE OH	54 CITY-ST-ZIP	
TITLE	C	61 TITLE	
NAME	DUNKER, PATRICIA	62 NAME	
STREET ADDRESS	2939 STONEWALL DR.	63 STREET ADDRESS	
CITY-ST-ZIP	BEAVERCREEK OH	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Patricia Dunker*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/96 (513) 222-2900  
DATE TIME PHONE #

CR2E034 (3/96)