

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004682

FILED
Feb 20, 2008
Secretary of State

Entity Name: O'NEIL & ASSOCIATES, INC.

Current Principal Place of Business:

495 BYERS RD
MIAMISBURG, OH 453423662

New Principal Place of Business:

495 BYERS RD
MIAMISBURG, OH 45342

Current Mailing Address:

495 BYERS RD
MIAMISBURG, OH 453423662

New Mailing Address:

495 BYERS RD
MIAMISBURG, OH 45342

FEI Number: 31-0629068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: CEO () Delete
Name: STATEN, JOHN E
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 453423662

Title: V () Delete
Name: MILLIGAN, THOMAS R
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 453423662

Title: SD () Delete
Name: CARLISLE, RICHARD
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 453423662

Title: CT () Delete
Name: STATEN, JOHN E
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 453423662

Title: P () Delete
Name: HEILMAN, ROBERT
Address: 495 BYERS RD.
City-St-Zip: MIAMISBURG, OH 453423662

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: STATEN, JOHN E
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 45342

Title: V (X) Change () Addition
Name: MILLIGAN, THOMAS R
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 45342

Title: SD (X) Change () Addition
Name: CARLISLE, RICHARD
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 45342

Title: CT (X) Change () Addition
Name: STATEN, JOHN E
Address: 495 BYERS RD
City-St-Zip: MIAMISBURG, OH 45342

Title: P (X) Change () Addition
Name: HEILMAN, ROBERT
Address: 495 BYERS RD.
City-St-Zip: MIAMISBURG, OH 45342

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: DEBRA ROBERTS

MS.

02/20/2008

Electronic Signature of Signing Officer or Director

_____ Date