2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F99000003485 Apr 03, 2000 8:00 am Secretary of State 1. Entity Name KRIEGER FORD, INC. 04-03-2000 90127 040 ***150.00 Principal Place of Business Mailing Address 1800 MORSE ROAD 1800 MORSE ROAD COLUMBUS OH 43229 COLUMBUS OH 43229-6604 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 31-0713133 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROSS, RANDY J Street Address (P.O. Box Number is Not Acceptable) 138 COMMERCE WAY SANFORD FL 32271 Zip Code City 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change Delete TITLE TITLE KRIEGE, GEORGE A NAME NAME 193 PROMENADE CIRCLE STREET ADDRESS STREET ADDRESS HEATHROW FL 32746 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 🔲 Change Delete TITLE TITLE FLOWERS, MICHAEL NAME NAME 100 S. THIRD ST. STREET ADDRESS STREET ADDRESS CITY-S1-2)P CITY-ST-ZIP COLUMBUS OH 43215 ☐ Change Addition TITLE Delete TITLE FITZPATRICK, THOMAS NAME NAME 1220 DUBLIN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43229 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE KRIEGER, PHILIP NAME NAME 3148 BRAWDON RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43221 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE KRIEGER, G. DOUGLAS NAME NAME 5615 WILD PINE DRIVE STREET ADDRESS STREET ADDRESS **WESTERVILLE OH 43082** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE FERGUSON, T. BRENT NAME NAME 6251 WILLOW CREST DRIVE STREET ADDRESS STREET ADDRESS COLUMBUS OH 43229 CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/00

1.14-888-3320

Daytime Phone #