FILED

2002 Uniform Business Report (UBR)

changed, or on an attachme

Mar 14, 2002 8:00 am DOCUMENT # P97000080689 **Secretary of State** 1. Entity Name W.I. OF FLORIDA, INC. 03-14-2002 90035 021 ***150.00 Principal Place of Business Mailing Address 2700 NORTHEAST LOOP 410 P O BOX 659792 SUITE 500 SAN ANTONIO TX 78265-5100 SAN ANTONIO FL 78217 2. Principal Place of Business 3. Mailing Address Lander brook Dr 5915 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Cleveland 59-3471667 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 44124 Fee Required 6. Name and Address of Current Registered Agent -7: Name and Address of New Registered Agent -----Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (9/01) TITLE CEOD TITLE Change ☐ Addition ☐ Defete NAME MUELLER, ROBERT NAME STREET ADDRESS 31799 PINE TREE ROAD STREET ADDRESS CITY-ST-ZIP PEPPER PIKE OH CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME RAMSBACHER, THOMAS O NAME STREET ADDRESS 14007 BLUFF PARK STREET ADDRESS CITY-ST-ZIP SAN ANTONIO TX CITY-ST-ZIP TITLE ☐ Delete ŤITLE 1X Change ☐ Addition GCS Rossi ASSUNTA NAME ASSUNTS, ROSSI NAME 5915 Landerbrook STREET ADDRESS 12900 LAKE AVE STREET ADDRESS cleveland, OH 44124 CITY-ST-7IP CITY-ST-ZIP LAKEWOOD OH TITLE Change Delete TITLE ☐ Addition NAME METZ, JOSEPH W NAME STREET ADDRESS 3454 SMUGGLERS COVER STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WILLOUGHBY OH ☐ Delete TITLE TITLE ☐ Change ☐ Addition MUELLER, RAYMOND K NAME NAME STREET ADDRESS **502 BAYBERRY DR** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ELYRIA OH** TITLE ☐ Delete TITLE Change ☐ Addition NAME CAMPBELL, JOHN F JR NAME STREET ADDRESS STREET ADDRESS 8483 COUNTRYVIEW ROAD CITY-ST-ZIP CITY-ST-ZIP **BROADVIEW HTS OH** 13. I hereby certify that the information supplied with this filling 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 repeture 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

vith all other like empowered



February 28, 2002

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: WI. Of Florida, Inc

Document No.:

P97000080689

FEI No.:

59-3471667

Dear Sir or Madam:

Enclosed please find a signed and completed 2002 Uniform Business Report for the above named company. Also enclosed is Check no. 0000006664 in the amount of \$150.00 as payment for the filing fee.

Should you have any questions regarding this matter, please feel free to call me at 440.461.3461, ext. 328.

Very truly yours, plonna L. Gerwenski

Donna L. Czerwinski

Compliance Specialist

enc.