2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 265004 May 18, 2000 8:00 am 1. Entity Name **Secretary of State** THE VSC, INC. 05-18-2000 90307 029 ***150.00 Principal Place of Business Mailing Address 7620 MARKET STREET 7620 MARKET STREET P O BOX 9128 P O BOX 9128 YOUNGSTOWN OH 44513-0128 YOUNGSTOWN OH 44513-9128 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 34-6520521 Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 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 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Addition ☐ Delete TITI F Change VTD TITI F NAME NAME DAVENPORT, LYNN E. STREET ADDRESS STREET ADDRESS 7620 MARKET ST CITY-ST-ZIP CITY-ST-7IP YOUNGSTOWN, OH 00000 ☐ Addition Change TITLE □ Delete NAME WOLFCALE, ARTHUR D. STREET ADDRESS STREET ADDRESS 7620 MARKET ST CITY-ST-ZIP CITY-ST-ZIP YOUNGSTOWN, OH 00000 Addition ☐ Change ☐ Delete TITLE NAME York, Marie Denise D. NAME STREET ADDRESS STREET ADDRESS 7620 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP Youngstown oh TITLE ☐ Delete TITLE Change ☐ Addition NAME MURPHY, JAMES F. NAME STREET ADDRESS STREET ADDRESS 7620 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP YOUNGSTOWN OH TITLE ☐ Delete TITLE [7] Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITI F ☐ Change TITLE NAME NAME

13. 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 attack ment with an address, with all other like empowered

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James F. Murphy 4/26/00