FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # 818911 (0)

1. Corporation Name

NATIONWIDE FINANCIAL SERVICES, INC.

Principal Place of Business	Mailing Address
ONE NATIONWIDE PLAZA COLUMBUS OH 43215	ONE NATIONWIDE PLAZA COLUMBUS OH 43215

3. Date Incorporated or Qualified: 07/22/1965
3a. Date of Last Report: 05/01/1995
4. FEI Number: 36-2434406 ☐ 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 / Suite, Apt. #, etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address — 26 / Suite, Apt. #, etc. 27 / City & State 28 / Zip 29 / Country 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ____

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	FRENZER, PETER F	
STREET ADDRESS	ONE NATIONWIDE PLAZA	
CITY-ST-ZIP	COLUMBUS OH	
TITLE	S	☐ DELETE
NAME	MERCER, RAE I	
STREET ADDRESS	ONE NATIONWIDE PLAZA	
CITY-ST-ZIP	COLUMBUS OH	
TITLE	C	☐ DELETE
NAME	WEIHL, HAROLD W	
STREET ADDRESS	14282 KING RD	
CITY-ST-ZIP	BOLWING GREEN OH	
TITLE	R	☐ DELETE
NAME	LAIRD, JAMES F. JR.	
STREET ADDRESS	ONE NATIONWIDE PLAZA	
CITY-ST-ZIP	COLUMBUS OH	
TITLE	D	☐ DELETE
NAME	FUELLGRAF, CHARLES L JR	
STREET ADDRESS	600 S. WASHINGTON ST.	
CITY-ST-ZIP	BUTLER PA	
TITLE	D XX	☒ DELETE
NAME	~~FRENZER, PETER F.~~	
STREET ADDRESS	~~ONE NATIONWIDE PLAZA~~	
CITY-ST-ZIP	~~COLUMBUS OH~~	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
2 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
3 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
4 TITLE	Vice President-General Manager	XX Change ☐ Addition
5 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	700001810177 -05/07/96--01011--005 ***200.00	☐ Change ☐ Addition
6 TITLE	TREASURER	☐ Change ☒ Addition
6 NAME	WILLIAM G GOSLEE	
6 STREET ADDRESS	One Nationwide Plaza	
6 CITY-ST-ZIP	Columbus OH 43216	

5-1-96

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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 4/25/96

WILLIAM G GOSLEE — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)