

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2008 8:00 am
Secretary of State

07-28-2008 90030 012 ***550.00

DOCUMENT # 828834

1. Entity Name
FIRST TRANSIT, INC.



Principal Place of Business
FIRST TRANSIT INC
705 CENTRAL AVENUE STE 500
CINCINNATI, OH 45202

Mailing Address
FIRST TRANSIT, INC., ATTN :TAX DEPT
705 CENTRAL AVENUE STE 500
CINCINNATI, OH 45202

00020400



2. Principal Place of Business - No P.O. Box #
600 Vine Street

3. Mailing Address
600 Vine St.

Suite, Apt. #, etc.
Suite 1400

Suite, Apt. #, etc.
Suite 1400

07162008 Chg-P CR2E034 (12/06)

City & State
Cinti. OH

City & State
Cinti. OH

4. FEI Number
23-1716119

Applied For
Not Applicable

Zip Country
45202 USA

Zip Country
45202 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME MURRAY, MICHAEL C
STREET ADDRESS 705 CENTRAL AVENUE STE 500
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE SD ☒ Delete
NAME DUNNING, RICK
STREET ADDRESS 705 CENTRAL AVENUE, STE. #500
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE TD ☒ Delete
NAME SLOAN, ALTON
STREET ADDRESS 705 CENTRAL AVENUE, STE. #500
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE AT ☐ Delete
NAME BEECHEM, BRIAN
STREET ADDRESS 705 CENTRAL AVENUE, STE. #500
CITY-ST-ZIP CINCINNATI, OH 45202

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☐ Change ☒ Addition
NAME Linda Bell
STREET ADDRESS 600 Vine St. Suite 1400
CITY-ST-ZIP Cinti. OH 45239

TITLE CFO ☐ Change ☒ Addition
NAME Christian Gartner
STREET ADDRESS 600 Vine St. Suite 1400
CITY-ST-ZIP Cinti. OH 45239

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 600 Vine St. Suite 1400
CITY-ST-ZIP Cinti. OH 45202

TITLE Treasurer ☐ Change ☒ Addition
NAME Wayne Johnson
STREET ADDRESS 600 Vine St. Suite 1400
CITY-ST-ZIP Cinti. OH 45202

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 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

Date

Daytime Phone #

7/24/08 513-241-2200