


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 832090 (5)					
1. Corporation Name NATIONAL REVENUE CORPORATION					

Principal Place of Business 2323 LAKE CLUB DRIVE COLUMBUS OH 43232		Mailing Address 2323 LAKE CLUB DRIVE COLUMBUS OH 43232	
--	--	--	--

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/02/1974	
4. FEI Number 31-0829931	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	SD FISH, STANLEY R.
STREET ADDRESS	1265 WEDGEFIELD LANE
CITY-ST-ZIP	NEW ALBANY OH
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	TVD MONNETT, KENNETH E
STREET ADDRESS	1639 RIDGEWAY PL.
CITY-ST-ZIP	COLUMBUS OH
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	PD SCHULTZ, RICHARD
STREET ADDRESS	700 LAKE DRIVE
CITY-ST-ZIP	BOCA RATON FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	President Michael F. Reeves
1.3 STREET ADDRESS	2323 Lake Club Drive
1.4 CITY-ST-ZIP	Columbus, OH 43232
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	V.P. & C.F.O. Michael A. Brady
2.3 STREET ADDRESS	2323 Lake Club Drive
2.4 CITY-ST-ZIP	Columbus, OH 43232
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Secretary John H. LeFevre
3.3 STREET ADDRESS	3680 Victoria Street North
3.4 CITY-ST-ZIP	Shoreview, MN 55126-2966
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Director Lawrence J. Mosner
4.3 STREET ADDRESS	3680 Victoria Street North
4.4 CITY-ST-ZIP	Shoreview, MN 55126-2966
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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: _____ 7/22/98

CR2E034 (10/97)