

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2003 8:00 am**  
**Secretary of State**

05-06-2003 90168 001 \*\*\*308.75

**DOCUMENT #833142**

1. Entity Name  
**GATES, MCDONALD & COMPANY**



Principal Place of Business  
3455 MILL RUN DR  
HILLIARD, OH 43602-6

Mailing Address  
P.O. BOX 182034  
COLUMBUS, OH 43216

**55038153**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**31-4187660**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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's signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME FULLERTON, DANNY  
STREET ADDRESS 3455 MILL RUN DR.  
CITY-STATE-ZIP HILLIARD, OH 43026

TITLE VPS ☐ Delete  
NAME SODEN, GLENN  
STREET ADDRESS 3455 MILL RUN DR.  
CITY-STATE-ZIP HILLIARD, OH 43026

TITLE VT ☐ Delete  
NAME DOVE, CAROL  
STREET ADDRESS 3455 MILL RUN DR.  
CITY-STATE-ZIP HILLIARD, OH

TITLE VP ☒ Delete  
NAME REED, DIANE  
STREET ADDRESS 3455 MILL RUN DR.  
CITY-STATE-ZIP HILLIARD, OH 43026

TITLE D ☒ Delete  
NAME URGENSON, W.G  
STREET ADDRESS 3455 MILL RUN DR.  
CITY-STATE-ZIP HILLIARD, OH 43026

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE VP ☐ Change ☒ Addition  
NAME William Evans  
STREET ADDRESS 3455 Mill Run Dr  
CITY-STATE-ZIP Hilliard, OH 43026

TITLE D ☐ Change ☐ Addition  
NAME Kelly Hamilton  
STREET ADDRESS 3455 Mill Run Dr.  
CITY-STATE-ZIP Hilliard, OH 43026

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #