

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90101 038 ***150.00

DOCUMENT # 835762
 1. Entity Name
THE CINCINNATI-VULCAN COMPANY

Principal Place of Business 5353 SPRING GROVE AVENUE CINCINNATI OH 45217	Mailing Address 5353 SPRING GROVE AVENUE CINCINNATI OH 45217-1026
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	31-0241780	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CT CORPORATION SYSTEM	TITLE	C
NAME	CURTIS, EVERETT	NAME	Curtis, Everett
STREET ADDRESS	5376 SHAKER RUN LANE	STREET ADDRESS	7358 Shaker Run Lane
CITY-ST-ZIP	WESTCHESTER OH 45069	CITY-ST-ZIP	West Chester OH 45069
TITLE	PD	TITLE	V/S/D
NAME	CURTIS, REX	NAME	David E. Kellner
STREET ADDRESS	141 LINDEN DR	STREET ADDRESS	618 Little Lane
CITY-ST-ZIP	CINCINNATI OH	CITY-ST-ZIP	Cincinnati OH 45215
TITLE	VSD	TITLE	P/T/D
NAME	SHEPHERD, TOM	NAME	Shepherd, Tom
STREET ADDRESS	5998 WINNETKA	STREET ADDRESS	5998 Winnetka Drive
CITY-ST-ZIP	CINCINNATI OH	CITY-ST-ZIP	Cincinnati OH 45236
TITLE	D	TITLE	V
NAME	BELL, J. PATRICK	NAME	Kluender, Alan
STREET ADDRESS	FIFTH THIRD BANK 38 FOUNTAIN SQUARE	STREET ADDRESS	6599 Miami Trails Drive
CITY-ST-ZIP	CINCINNATI OH 45263	CITY-ST-ZIP	Loveland OH 45140
TITLE	D	TITLE	V
NAME	CURTIS, PATRICIA J	NAME	Mackiewicz, Tom
STREET ADDRESS	5376 SHAKER RUN LANE	STREET ADDRESS	7112 Maple Creek Drive
CITY-ST-ZIP	WESTCHESTER OH 45069	CITY-ST-ZIP	Middletown, OH 45044
TITLE	D	TITLE	V
NAME	JOHNSON, JOHN	NAME	Olson, Gregory W
STREET ADDRESS	106 MARSH CREEK RD	STREET ADDRESS	9142 Knight ridge Lane
CITY-ST-ZIP	AMELIA ISLAND FL 32034	CITY-ST-ZIP	Mason, OH 45040

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 attachment with an address, with all other like empowered.

SIGNATURE: Gregory W. Olson, VP Finance /17/00 513/242-2672
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #