

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

FILED  
Aug 04 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **836037**

1. Corporation Name

**TRESCO SERVICE CORPORATION**

Principal Place of Business <b>3735 Green Rd</b> <b>3925 Embassy Parkway</b> <b>Beachwood OH 44122</b> <b>US</b>	Mailing Address <b>3925 Embassy Pky</b> <b>3925 Embassy Parkway</b> <b>Akron OH 44333-799</b> <b>US</b>
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3. Date Incorporated or Qualified <b>03/26/1976</b>	3a. Date of Last Report <b>04/28/1996</b>
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2. Principal Place of Business <b>21 3735 Green Road</b> Suite, Apt. #, etc.	2a. Mailing Address <b>26 3735 Green Road</b> Suite, Apt. #, etc.	4. FEI Number <b>34-0930570</b>	Applied For Not Applicable
22 City & State <b>23 Beachwood, OH</b>	27 City & State <b>28 Beachwood, OH</b>	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
24 Zip <b>44122-5718</b>	25 Country <b>USA</b>	29 Zip <b>44122-5718</b>	30 Country <b>USA</b>

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>Vinney, Les C</b>		1.2 NAME <b>Korach, Jeffrey L</b>	
STREET ADDRESS <b>3735 Green Road</b>		1.3 STREET ADDRESS <b>3735 Green Road</b>	
CITY-ST-ZIP <b>Beachwood, OH</b>		1.4 CITY-ST-ZIP <b>Beachwood, OH 44122-5718</b>	
TITLE <b>S</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>V/T</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>Calise, Nicholas J</b>		2.2 NAME <b>Graessle, William S</b>	
STREET ADDRESS <b>3925 Embassy Parkway</b>		2.3 STREET ADDRESS <b>3735 Green Road</b>	
CITY-ST-ZIP <b>Akron, OH</b>		2.4 CITY-ST-ZIP <b>Beachwood, OH 44122-5718</b>	
TITLE <b>T</b>	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <b>V</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>McMillan, Robert A</b>		3.2 NAME <b>Jachnycky, Anthony M</b>	
STREET ADDRESS <b>3925 Embassy Parkway</b>		3.3 STREET ADDRESS <b>3735 Green Road</b>	
CITY-ST-ZIP <b>Akron, OH</b>		3.4 CITY-ST-ZIP <b>Beachwood, OH 44122-5718</b>	
TITLE <b>AS</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>McGinley, Mark D</b>		4.2 NAME <b>Tierney, James L</b>	
STREET ADDRESS <b>3735 Green Road</b>		4.3 STREET ADDRESS <b>3735 Green Road</b>	
CITY-ST-ZIP <b>Beachwood, OH</b>		4.4 CITY-ST-ZIP <b>Beachwood, OH 44122-5718</b>	
TITLE <b>AS</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>Taffi, Joan M</b>		5.2 NAME	
STREET ADDRESS <b>3925 Embassy Parkway</b>		5.3 STREET ADDRESS	
CITY-ST-ZIP <b>Akron, OH</b>		5.4 CITY-ST-ZIP	
TITLE <b>VPAT</b>	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>Sherwood, George K</b>		6.2 NAME	
STREET ADDRESS <b>3925 Embassy Parkway</b>		6.3 STREET ADDRESS	
CITY-ST-ZIP <b>Akron, OH</b>		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: \_\_\_\_\_ James L. Tierney, Secretary 7/29/97 216/292-5156

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