## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #848723**

1. Entity Name
TAPE PRODUCTS COMPANY



Principal Place of Business

Mailing Address

11630 DEERFIELD RD CINCINNATI, OH 45242 11630 DEERFIELD RD CINCINNATI, OH 45242

## FILED Feb 18, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01082008

No Chg-P

CR2E034 (11/05)

4. FEI Number 31-0731346

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR STE 4 WESTON, FL 33331

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IN THIS SPACE

8.	The above named entity submits	s this statement for the purpose of chang	ing its registered office or registered agen	t, or both, in the State of Florida.	I am familiar with, and accept
	the obligations of registered age		• • •		·

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 \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees U00000829971 02/26/08-80065-010 150.00

TITLE CEOP  NAME FETTE, JOHN A  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE D  NAME FETTE, JANET F  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE SD  NAME FETTE, WILLIAM J  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE SD  NAME FETTE, WILLIAM J  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE CFOV  NAME GABBARD, R. STEPHEN  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE V  NAME FRAZIER, GAIL B  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE V  NAME FRAZIER, GAIL B  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE V  NAME KAGRISE, CYNTHIA L  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  TITLE V  NAME KAGRISE, CYNTHIA L  STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242					
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SIREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  IIITE D NAME FETTE, JANET F SIREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  IIITE SD NAME FETTE, WILLIAM J SIREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  IIITE CFOV NAME GABBARD, R. STEPHEN STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  IIITE CFOV CITY-ST-ZIP CINCINNATI, OH 45242  IIITE V NAME FRAZIER, GAIL B SIREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45242  IIITE V NAME KAGRISE, CYNTHIA L SIREET ADDRESS 11630 DEERFIELD RD CITY-ST-ZIP CINCINNATI, OH 45242	TITLE	CEOP			
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CITY-ST-ZIP CINCINNATI, OH 45242  TIILE V NAME KAGRISE, CYNTHIA L STREET ADDRESS 11630 DEERFIELD RD	NAME	FRAZIER, GAIL B			
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	NAME	KAGRISE, CYNTHIA L			
CITY-ST-ZIP CINCINNATI, OH 45242	STREET ADDRESS	11630 DEERFIELD RD			
	CITY+ST-ZIP	CINCINNATI, OH 45242			

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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 libs empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/31/08

Daytime Phone #