

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra P. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 851730 (2)
1. Corporation Name
Big B, Inc.

Principal Place of Business Mailing Address

2. Principal Place of Business 21 1925 Enterprise Parkway Suite, Apt. #, etc.		2a. Mailing Address 26 1925 Enterprise Parkway Suite, Apt. #, etc.		3. Date Incorporated or Qualified 1/29/82	3a. Date of Last Report 4/20/96
22 City & State Twinsburg, Ohio		27 City & State Twinsburg, Ohio		4. FEI Number 63-0632551	Applied For Not Applicable
23 Zip 44087		28 Zip 44087		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
25		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ 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	FL 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 reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Bruno, Anthony J. ☒ DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	President / Director ☐ Change ☒ Addition D. Dwayne Hoven 162 Deerfield Court Aurora, OH 44202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO Bruno, Vincent J. ☒ DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	Treasurer ☐ Change ☒ Addition Brian P. Carney 19708 Kensington Court Strongsville, OH 44136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jones, Arthur M.S. ☒ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	Vice-President ☐ Change ☒ Addition Robert T. Raaf 2273 Wellington Circle Hudson, OH 44236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT Tortorice, Michael J. ☒ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	Secretary / Director ☐ Change ☒ Addition Jack A. Staph 2628 Kerwick Road University Heights, OH 44118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cohn, Richard ☒ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Alderman, Isaac ☒ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	500002179365 -05/15/97--01010--037 ***165.00

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: _____ Date: 4/29/97 (216) 425-9811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)