

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005960

FILED
Apr 28, 2009
Secretary of State

Entity Name: MYERS/SCHMALENBERGER INCORPORATED

Current Principal Place of Business:

462 SOUTH LUDLOW ALLEY
COLUMBUS, OH 43215

New Principal Place of Business:

Current Mailing Address:

462 SOUTH LUDLOW ALLEY
COLUMBUS, OH 43215

New Mailing Address:

FEI Number: 31-1310090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEYER, GREG A
934 LAKE BALDWIN LANE
ORLANDO, FL 32814 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: SCHMALENBERGER, TIMOTHY S
Address: 462 S. LUDLOW ALLEY
City-St-Zip: COLUMBUS, OH 43215

Title: VPVC () Delete
Name: MYERS, KEITH A
Address: 462 S. LUDLOW ALLEY
City-St-Zip: COLUMBUS, OH 43215

Title: SD () Delete
Name: MCCOY, KAREN J
Address: 462 S. LUDLOW ALLEY
City-St-Zip: COLUMBUS, OH 43215

Title: T () Delete
Name: HOSTETTLER, CHRIS E
Address: 462 S. LUDLOW ALLEY
City-St-Zip: COLUMBUS, OH 43215

Title: VD () Delete
Name: REEDS, KERRY M
Address: 462 S. LUDLOW ALLEY
City-St-Zip: COLUMBUS, OH 43215

Title: VD () Delete
Name: MEYER, GREG A
Address: 934 LAKE BALDWIN LANE
City-St-Zip: ORLANDO, FL 32814 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS E. HOSTETTLER

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date