

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002618

Entity Name: EJD & ASSOCIATES CO.

FILED  
Mar 06, 2005  
Secretary of State

## Current Principal Place of Business:

115 W. WASHINGTON STREET, SUITE 15E  
INDIANAPOLIS, IN 46204

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7066, TAX DEPT.  
INDIANAPOLIS, IN 46207

## New Mailing Address:

C/O CORPORATE PARALEGAL  
115 W. WASHINGTON ST., SUITE 15E  
INDIANAPOLIS, IN 46204

FEI Number: 34-1302524

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDREW SERVICE CORPORATION OF FLORIDA  
201 SOUTH BISCAYNE BLVD., SUITE 2100  
MIAMI, FL 331314330 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: P/C ( ) Delete  
Name: ZARLENGA, LOUIS A  
Address: 100 DEBARTOLO PLACE  
City-St-Zip: YOUNGSTOWN, OH 44513

Title: V/D ( ) Delete  
Name: MCGUIRE, MICHAEL J  
Address: 100 DEBARTOLO PLACE  
City-St-Zip: YOUNGSTOWN, OH 44513

Title: S/D ( ) Delete  
Name: BARRETT, JEFFREY A  
Address: 100 DEBARTOLO PLACE  
City-St-Zip: YOUNGSTOWN, OH 44513

Title: T/D ( ) Delete  
Name: PARTIKA, RICHARD  
Address: 100 DEBARTOLO PLACE  
City-St-Zip: YOUNGSTOWN, OH 44513

## 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  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LOUIS ZARLENGA

P

03/06/2005

Electronic Signature of Signing Officer or Director

Date