2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002618

Entity Name: EJD & ASSOCIATES CO.

City-St-Zip:

YOUNGSTOWN, OH 44513

FILED May 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 225 W. WASHINGTON ST. INDIANAPOLIS, IN 46207 **Current Mailing Address: New Mailing Address:** 225 W. WASHINGTON ST., PO BOX 7033 C/O CORPORATE PARALÉGAL INDIANAPOLIS, IN 46207 FEI Number: 34-1302524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDREW SERVICE CORPORATION OF FLORIDA 201 SOUTH BISCAYNE BLVD., SUITE 2100 MIAMI, FL 331314330 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ZARLENGA, LOUIS A Name: Name: 100 DEBARTOLO PLACE Address: Address: City-St-Zip: YOUNGSTOWN, OH 44513 City-St-Zip: Title: V/D Title: () Delete () Change () Addition Name: MCGUIRE, MICHAEL J Name: 100 DEBARTOLO PLACE Address: Address: YOUNGSTOWN, OH 44513 City-St-Zip: City-St-Zip: Title: Title: S/D () Delete () Change () Addition BARRETT, JEFFREY A Name: Name: 100 DEBARTOLO PLACE Address: Address: City-St-Zip: YOUNGSTOWN, OH 44513 City-St-Zip: Title: T/D () Delete Title: () Change () Addition PARTIKA, RICHARD Name: Name: Address: 100 DEBARTOLO PLACE Address:

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.

City-St-Zip:

SIGNATURE: LOUIS ZARLENGA PR 05/16/2008