FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 18, 2003 8:00 am Secretary of State

DOCUMENT # F01000004947			04-18-2003 90176 027 ***150.00		
1. Entity Name			/		
QQAgency of Ohio, Inc.					
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	The state of the s		- 		
DO NOT WEIT	E IN THIS SPA	CE	}		
DO NOT WINT	L III IIIIO OF	CL			
Principal Place of Business			-		
		m Dona			
17800 Royalton Road 17800 Royalton Suite, Apt. #, etc. Suite, Apt. #, etc.		n ROAU	DO NOT WRITE IN THIS SPACE		
·			DO NOT WRITE IN THIS SPACE		
City & State	City & State	City & State		4. FEI Number Applied For	
Strongsville, Ohio	Strongsville, Ohio		34-1960610	Not Applicable	
Zip Country	Zip Country		\$8.75 Additional		
44136 United Sta	tes 44136	United State	5. Certificate of Status Desired	Fee Required	
	* * * * * * * * * * * * * * * * * * *	7	. Name and Address of Current F	Registered Agent	
DO NOT	WOITE	Name CT Co	orporation System		
DO NOT		Street Address	Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road		
IN THIS S	SPACE	1200_800	arm bine istand koad		
	•.				
· <u>'</u>		City Plantati	ion	FL Zip Code 33324	
The above named entity submits this state accept the obligations of registered agent.	tement for the purpose of changing	ng its registered office or re	egistered agent, or both, in the State of Fl	orida. I am familiar with, and	
SIGNATURE			.1		
	stered agent and title if applicable. (N	NOTE: Registered Agent signa	ature required when reinstating)	DATE	
January 1 - May 1 Fee is \$150.00			9. Election Campaign Final	ncing \$5.00 May Be	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Departmen	at of State	• :	Trust Fund Contribution.		
10. OFFICERS AND D		- · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
THE President	MCCTORO	TITLE			
NAME George A. Gehringer		NAME	. ` ' '	(£)	
STREET ADDRESS 17800 Royalton Road		STREET ADDRESS		RZE034B (1270	
CITY-ST-ZIP, Strongsville, OF	H 44136	CITY-ST-ZIP			
TITLE Vice President		πιε			
NAME Gloria J. Williams		NAME OTDEET ADDRESS			
STREET ADDRESS 17800 Royalton Road		STREET ADDRESS CITY-ST-ZIP			
CITY-ST-ZIP Strongsville, OH 44136					
MRE Treasurer NAME David A. Canzone		TITLE NAME	**		
STREET ADDRESS 17800 Royalton Road		STREET ADDRESS	DO NOT WE	NTE	
CITY-SY-ZIP Strongsville, OH 44136		CITY-ST-ZIP	DO NOT WE	(11)	
TITLE Secretary		TITLE	IN THIS SPA	/CE	
NAME Kathleen L. Mesel		NAME			
STREET ADDRESS 17800 Royalton Road		STREET ADDRESS CITY - ST - ZIP			
CITY-ST-ZIP Strongsville, OF	1 44136		*	-	
NAME		TITLE NAME	• , ,		
STREET ADDRESS		STREET ADDRESS		7	
CITY - ST - ZIP		CITY-ST-ZIP			
TITLE	, , , , , , , , , , , , , , , , , , , ,	πηίε			
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STREET ADDRESS		STREET ADDRESS		The family of the second of th	
CITY-ST-ZIP		CITY - ST - ZIP			
12. I hereby certify lhat the information supplied					
indicated on this report or supplemental rep of the corporation or the receiver or trustee					
attachment with an address, with all other like e		- , s, - nopidi ev			
SIGNATURE: A.	α		4 15-62 /4	(40) 572-2400	
	OR PRINTED NAME OF SIGNING OFF	ICER OR DIRECTOR	4-15-63 (4	40) 572-2400 Daytime Phone #	