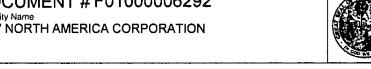
2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # F01000006292 SHV NORTH AMERICA CORPORATION

FILED Apr 26, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

Principal Place of Business

102 WEST WHITING STREET, SUITE 102 TAMPA, FL 33602

Mailing Address 300 PIKE STREET CINCINNATI, OH 45202



04192007

No Chg-P

CR2E034 (11/05)

4. FEI Number 13-2727622

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empo

SIGNATURE AND TYPED OR PE

SIGNATURE: _

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

					<i>'</i>
	named entity submits this statement for the $\boldsymbol{\rho}$ tions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE Registered	i Agent signature	required when reinstating)	DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			27 C C C C
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRASS, KEITH B 300 PIKE STREET CINCINNATI, OH 45202				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GOETZ, JAMES H 300 PIKE STREET CINCINNATI, OH 45202				000000733792 05/09/07-80099-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BEDELL, CHRISTOPHER J 300 PIKE STREET CINCINNATI, OH 45202			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCINTYRE, JERE R 300 PIKE STREET CINCINNATI, OH 45202			IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD KENNEDY, PATRICK RIJNKADE 1 3511 LC UTRECHT THE NEVERLANDS,			•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARTIN, EVERETT N 300 PIKE ST CINCINNATI, OH 45202			:	
indicated	on this report or supplemental report is true a	and accurate and that my signati	ure shall hav	e the same legal effec	, Florida Statutes. I further certify that the information t as if made under oath; that I am an officer or director s; and that my name appears in Block 10 or Block 11 if