

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001772

FILED
Jan 14, 2010
Secretary of State

Entity Name: THE O.N. EQUITY SALES COMPANY

Current Principal Place of Business:

ONE FINANCIAL WAY
ATTN: PAULINE JONES
CINCINNATI, OH 45242

New Principal Place of Business:

Current Mailing Address:

ONE FINANCIAL WAY
ATTN: PAULINE JONES
CINCINNATI, OH 45242

New Mailing Address:

FEI Number: 31-0742113 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SULLIVAN, TED
113 S. ARMENIA AVENUE
TAMPA, FL 33609 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: C
Name: O'MALEY, DAVID B
Address: ONE FINANCIAL WAY
City-St-Zip: CINCINNATI, OH 45242

Title: DS
Name: HAVERKAMP, MICHAEL F
Address: ONE FINANCIAL WAY
City-St-Zip: CINCINNATI, OH 45242

Title: CEO
Name: HUFFMAN, GARY T
Address: ONE FINANCIAL WAY
City-St-Zip: CINCINNATI, OH 45242

Title: PTD
Name: TURNER, BARBARA A
Address: ONE FINANCIAL WAY
City-St-Zip: CINCINNATI, OH 45242

Title: VP
Name: BLEY, JEFFERY A JR
Address: ONE FINANCIAL WAY
City-St-Zip: CINCINNATI, OH 45242

Title: D
Name: PALMER, JOHN J
Address: ONE FINANCIAL WAY
City-St-Zip: CINCINNATI, OH 45242

I hereby 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 all other like empowered.

SIGNATURE: BARBARA A. TURNER

PTD

01/14/2010

Electronic Signature of Signing Officer or Director

Date