## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## May 09, 2005 8:00 am Secretary of State DOCUMENT # F02000006366 05-09-2005 90293 011 \*\*\*150.00 1. Entity Name AK\$M/GUILD, INC. Principal Place of Business Mailing Address 100 W. THIRD AVE ST 350 100 W. THIRD AVE ST 350 50050890 COLUMBUS, OH 43201 COLUMBUS, OH 43201 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04252005 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 31-1749163 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. CFO TITLE ☐ Delete TITI F E Change ☐ Addition WISE, HENRY A II M.D. NAME NAME WISE, HENRY A II, M.D. STREET ADDRESS 100 W. THIRD AVE ST 350 STREET ADDRESS 100 WEST THIRD AVENUE, SUITE 350 COLUMBUS, OH 43201 CITY-ST-7IP CITY-ST-ZIP COLUMBUS, OHIO 43201 ☐ Delete TITLE TITLE ▼ Change ☐ Addition STEVENS, ANN 100 WEST THIRD AVENUE, SUTTE 350 STEVENS, ANN NAME NAME 100 W. THIRD AVE ST 350 STREET ADDRESS STREET ADDRESS COLLIMBUS, OHIO 43201 CITY-ST-ZIP COLUMBUS, OH 43201 CITY-ST-ZIP CFO Change TITLE CEO ☐ Delete TITLE ☐ Addition HUGHES, RIC 100 WEST THIRD AVENUE, SUITE 350 HUGHES, RIC NAME NAME STREET ADDRESS 100 W. THIRD AVE ST 350 STREET ADDRESS CITY-ST-ZIP COLUMBUS, OH 43201 CITY-ST-ZIP COLUMBUS, OHIO 43201 TITLE TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TIT: F TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change<sup>—</sup> - Addition NAME NAME STREET ADDRESS STREET ADDRESS -CHY-ST-7P-CtTY-ST-7IP 12. Thereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, wi SIGNATURE: \_ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

**FILED**