2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003847

Entity Name: STEVEN SCHAEFER ASSOCIATES, INC.

FILED Jan 07, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	DALLION DRI' ATI, OH 45241				
Current Mailing Address:			New Mailing Address:		
	DALLION DRI' ATI, OH 45241				
FEI Number	: 31-0964154	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
1201 HAY	ATION SERVI S STREET SSEE, FL 323	CE COMPANY 8012525 US			
	e named entity e of Florida.	submits this statement for the p	urpose of changing its register	red office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (SCHAEFER, S 8549 WUEST CINCINNATI, C	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MILLER, JAME 4279 MARCRE CINCINNATI, C	EST DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (SCHWIETER, 5460 LONGLA CINCINNATI, C	KE COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (CIPRIAN, MICI 6322 BACH DI WEST CHEST	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	DALEY, SHAW 8201 MILLCRE		Title: Name: Address: City-St-Zin:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: STEVEN E. SCHAEFER PE 01/07/2005