

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003847

FILED
May 28, 2008
Secretary of State

Entity Name: STEVEN SCHAEFER ASSOCIATES, INC.

Current Principal Place of Business:

10411 MEDALLION DRIVE STE. 121
CINCINNATI, OH 45241

New Principal Place of Business:

Current Mailing Address:

10411 MEDALLION DRIVE
SUITE 121
CINCINNATI, OH 45241

New Mailing Address:

FEI Number: 31-0964154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: SCHAEFER, STEVEN E
Address: 8549 WUEST ROAD
City-St-Zip: CINCINNATI, OH 45251

Title: P () Delete
Name: MILLER, JAMES R
Address: 4279 MARCREST DRIVE
City-St-Zip: CINCINNATI, OH 45211

Title: POB () Delete
Name: SCHWIETER, EDWARD W
Address: 5460 LONGLAKE COURT
City-St-Zip: CINCINNATI, OH 45211

Title: T () Delete
Name: RILEY, GREG
Address: 5882 HOINECREST LN
City-St-Zip: MASON, OH 45040

Title: S () Delete
Name: TENHUNDFELD, ART
Address: 1172 OBERTING
City-St-Zip: LAWRENCEBURG, IN 47025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CLARK, DANIEL J
Address: 2472 WASHINGTON AVE.
City-St-Zip: CINCINNATI, OH 45231

Title: S (X) Change () Addition
Name: MOSTER, WILLIAM C
Address: 2934 STRUBLE RD
City-St-Zip: CINCINNATI, OH 45251

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DIANA J STRINE

AA

05/28/2008

Electronic Signature of Signing Officer or Director

_____ Date