2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003847

Entity Name: STEVEN SCHAEFER ASSOCIATES, INC.

FILED Jaņ 06, 2<u>011</u> Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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10411 MEDALLION DRIVE

SUITE 121

CINCINNATI, OH 452414808 US

Current Mailing Address: New Mailing Address:

10411 MEDALLION DRIVE SUITE 121

CINCINNATI, OH 452414808 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR STE 4 WESTON, FL 33331 US

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

OFFICERS AND DIRECTORS:

Title:

SCHAEFER, STEVEN E Name: 8549 WUEST ROAD Address: City-St-Zip: CINCINNATI, OH 45251

Title:

Name: MILLER JAMES R 4279 MARCREST DRIVE Address: CINCINNATI, OH 45211 City-St-Zip:

POB Title:

SCHWIETER, EDWARD W Name: 5460 LONGLAKE COURT Address: City-St-Zip: CINCINNATI, OH 45211

Title: VΡ

RILEY, GREGORY J Name: Address: 5882 HOMECREST LANE City-St-Zip:

MASON, OH 45040

Title:

Name: MOSTER, WILLIAM C Address: 2934 STRUBLE RD City-St-Zip: CINCINNATI, OH 45251

Title:

CIPRIAN, MICHAEL C Name: Address: 7105 AIRYVIEW DR. City-St-Zip: LIBERTY TWP. OH 45044

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.

VΡ SIGNATURE: MICHAEL A. CIPRIAN 01/06/2011