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Secretary of State

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**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

50015126



02062006 Chg-P CR2E034 (11/05)

DOCUMENT # F05000006626					
1. Entity Name COLUMBUS WINNELSON CO.					
Principal Place of Business 2711 CENTERVILLE ROAD, SUITE 400 WILMINGTON, DE 19808			Mailing Address 2628 JOHNSTOWN ROAD COLUMBUS, OH 43219-2309		
2. Principal Place of Business 2628 JOHNSTOWN ROAD			3. Mailing Address 3500 COMMERCE CENTER DR		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State COLUMBUS OH			City & State FRANKLIN, OH		
Zip 43219			Zip 45005		
Country USA			Country USA		
4. FEI Number 43-1242086			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				7. Name and Address of New Registered Agent	
Name					
Street Address (P.O. Box Number is Not Acceptable)					
City				FL 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 registering.)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	C	☒ Delete	TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	FRY, BENJAMIN G		NAME	CALVIN GROUT	
STREET ADDRESS	3110 KETTERING BLVD.		STREET ADDRESS	3110 KETTERING BLVD	
CITY- ST- ZIP	DAYTON, OH 454391972		CITY- ST- ZIP	DAYTON, OH 45005	
TITLE	VC	☐ Delete	TITLE		☒ Change ☐ Addition
NAME	MCINTYRE, JAMES D		NAME		
STREET ADDRESS	3500 COMMERCE CENTER DR.		STREET ADDRESS		
CITY- ST- ZIP	FRANKLIN, OH 45005		CITY- ST- ZIP		
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SAUNDERS, DANA K		NAME		
STREET ADDRESS	2628 JOHNSTOWN RD.,		STREET ADDRESS		
CITY- ST- ZIP	COLUMBUS, OH 432192309		CITY- ST- ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	OSENBAUGH, JACK D		NAME		
STREET ADDRESS	3110 KETTERING BLVD.		STREET ADDRESS		
CITY- ST- ZIP	DAYTON, OH 45439		CITY- ST- ZIP		
TITLE	ST	☒ Delete	TITLE	SECRETARY/TREASURER	☐ Change ☐ Addition
NAME	DICE, JEFFREY M		NAME	BENJAMIN G FRY	
STREET ADDRESS	3500 COMMERCE CENTER DRIVE		STREET ADDRESS	3500 COMMERCE CENTER DR	
CITY- ST- ZIP	FRANKLIN, OH 45005		CITY- ST- ZIP	FRANKLIN, OH 45005	
TITLE		☐ Delete	TITLE	DIRECTOR	☐ Change ☒ Addition
NAME			NAME	RICK L MOORE	
STREET ADDRESS			STREET ADDRESS	256 LINDEN AVE	
CITY- ST- ZIP			CITY- ST- ZIP	NEWARK, OH 43055	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, with all other like empowered.					
SIGNATURE: <i>Benjamin Frys</i>			3/27/06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: _____		