

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000920

FILED  
Jul 01, 2009  
Secretary of State

Entity Name: PARK NATIONAL CORPORATION

**Current Principal Place of Business:**

50 NORTH 3RD STREET  
NEWARK, OH 43055

**New Principal Place of Business:**

**Current Mailing Address:**

50 NORTH 3RD STREET  
NEWARK, OH 43055

**New Mailing Address:**

FEI Number: 31-1179518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CD ( ) Delete  
Name: DELAWDER, C DANIEL  
Address: 635 HOWELL DRIVE  
City-St-Zip: NEWARK, OH 43055

Title: VCD ( ) Delete  
Name: EGGER, HARRY O  
Address: 350 N BROADMOOR BLVD  
City-St-Zip: SPRINGFIELD, OH 45504

Title: D ( ) Delete  
Name: MCCONNELL, WILLIAM T CEC  
Address: 150 PINEHURST DRIVE  
City-St-Zip: DRANVILLE, OH 43023

Title: CFO ( ) Delete  
Name: KOZAK, JOHN W  
Address: 635 KIMBERLY COURT  
City-St-Zip: HEATH, OH 43056

Title: PSD ( ) Delete  
Name: TRAUTMAN, DAVID L  
Address: 358 BRYN DU DRIVE  
City-St-Zip: GRANVILLE, OH 43023

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: MCCONNELL, WILLIAM T CEC  
Address: 150 PINEHURST DRIVE  
City-St-Zip: GRANVILLE, OH 43023

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

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

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: JOHN W. KOZAK

CFO

07/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date