

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000000920

**FILED**  
**Aug 27, 2012**  
**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 (X)**

**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

**OFFICERS AND DIRECTORS:**

**Title:** CD  
**Name:** DELAWDER, C DANIEL  
**Address:** 635 HOWELL DRIVE  
**City-St-Zip:** NEWARK, OH 43055

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

**Title:** D  
**Name:** MCCONNELL, WILLIAM T CEC  
**Address:** 150 PINEHURST DRIVE  
**City-St-Zip:** GRANVILLE, OH 43023

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

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

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.

**SIGNATURE:** JOHN W. KOZAK

CFO

08/27/2012

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

\_\_\_\_\_  
Date