## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address 27401 WESTOWN BLVD.

**SHITE 1507** 

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300001155 (1)

SECOND INVESTORS INC.

Principal Place of Business

27401 WESTOWN BLVD.

WESTLAKE OH 44145			WESTLAKE OH 44145-4544								
							3	3. Date Incorporated or Qualified			
2. Principal Pl	lace of Busin	riess	2a. Mailing Add	2a. Mailing Address				FEI Number	L	-A	oplied For
21			26	26				88-0288230		No	t Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				\$8.75 Additional			
22			27	27				5. Certificate of Status Desired	B	Fee Re	quired
City & State			City & State	City & State .				6. Election Campaign Financing \$5.00 May Be			
23			28					Trust Fund Contribution		Added t	
Zip		Country	Z <sub>i</sub> p		Coun	try	8	B. This corporation has liability			. 199.032
24		25	29	30	0			Florida Statutes	Yes Yes		
	9. Name	and Address of Curr	ent Registered Agent	l			10	<ol><li>Name and Address of New</li></ol>	Registered	d Agent	
	ver, david				- 1	Name					
HONIGMAN MILLER SCHWARTZ AND COHN 390 NORTH ORANGE AVENUE, SUITE 1300					82 Street Address (P.O. Box Number is Not Acceptable)						
					_	GREI	ENBE	RG TRAURIG, e	al.		
ORL	ANDO FL	32802				111	Mos	th Orange Aver	(	Sudto 2	2050
					7	B4 City	NOT	th orange aver		QE Zin (	Code
						Orla	ando		F	L   32	2801
11. Pursuant	to the provis	sions of Sections 607.0	502 and 607,1508, Flo	rida Statutes,	the ab	ove-named o	corporat	tion submits this statement for t s board of directors. I hereby a	he purpose	of changing it	is registered
office or r agent Ta	registered at ım familiar w	gent, or both, in the Sta ilh, and accept the ob	tie of Florida. Such Chi ligations of, Section 60	ange was aut 17.0505, Florid	nonzeo da Statu	ites.	DUIAUUTES	s board or directors. I hereby a	restrue at	ppointment as	registered
SIGNATURE		•									
SIGNATORE	Signature, type	d or punted name of registered	agent and title if applicable	(NOTE: F		Agent signature r	required wt		DATE		
12.	, <u></u>	OFFICERS A	AND DIRECTORS		13.		,	ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	CP		LJ	DELETE	1.1 1111	.E				☐ Change	Addition
NAME		I, DONALD A SR.			1.2 NA	ME					
STREET ADDRESS 27401 WESTOWN BLVD., SUIT			UITE 1507	E 1507				•			
CITY - ST - ZIF	WESTLA	KE OH 44145			1.4 CiT	Y-ST-ZIP		, · , ·			
TITLE			LJ	DELETE	21 TiT	.E				Change	Addition
NAME					22 NAI	ME					
STREET ADDRESS					23 STF	EET ADDRESS					
CITY - S1 - Z(P					2 4 CII	Y-ST-ZIP					
TILLE			L	DELETE	3.1 TITI	LE				Change	Addition
NAVE.					3.2 NA	ME					
STREET ADDRESS					3.3 STF	REET ADDRESS					
CITY-ST-ZIP						Y-ST-ZIP	<u> </u>		<del></del>		1 1 1 1000
TITLE	1		ليبا	DELETE	4.1 717	LE .				L Change	Addition
NAME					4. 2 NA	ME					
STREET ACORESS					4.3 STF	REET ADDRESS					
CITY- ST- ZIP						Y-ST-ZIP	ļ <u>.</u>				
TITLE			L	DELETE	5.1 TIT	LE	1			L Change	Addition
NAME					5.2 NA	ME					
STREET ADDRESS					5.3 STI	REET ADDRESS					
011Y - \$1 - 20F	ļ				5.4 CIT	Y-ST-ZIP	ļ		<del></del>		
TOTE			LJ	DELETE	6.1 TI3	LE				Change	Addition
NAME					6.2 NA	ME					
STREET ADDRESS					6.3 ST	REET ADDRESS					
CITY-ST-74	1					Y-ST-ZIP	<u> </u>	0-2-440 07(0)(0) Fig. 24-00			
for the server of the	man har of manifestal	t are thin amount concel :	ar numedorsantal nanue	d roport is true	റെവർ	courate and	d that mu	Section 119.07(3)(i), Florida Starsignature shall have the same	locial offect	lae ifmada lin	idar oath: that
tam an c	officer or dire in Black 12	ector of the corporation or Block 13.0 changes	or the receiver or trus	stee empower with an addre	red to e	xecute this r	report as	required by Chapter 607, Flori	da Statutes	; and that my	name
1		///									

**SIGNATURE:** 

President Feb. 4, 1997 (216)835-0950

**FILED** 

Feb 12 1997 8:00am

Secretary of State