

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000004595 (5)

1. Corporation Name

GLIMCHER CENTERS, INC.



Principal Place of Business

20 S. THIRD ST
COLUMBUS OH 43215
US

Mailing Address

20 S. THIRD ST
COLUMBUS OH 43215
US

3. Date Incorporated or Qualified
10/12/1993

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
31-1393471

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent, and title if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME WEILER, ALAN R.
STREET ADDRESS 150 E. MOUND ST.
CITY-STATE-ZIP COLUMBUS OH

1.1 TITLE ☐ Change ☒ Addition
12 NAME GLIMCHER, HERBERT
13 STREET ADDRESS 10 N. DREXEL AVE.
14 CITY-STATE-ZIP COLUMBUS, OH 43209

TITLE ☐ DELETE
NAME GEE, GORDON
STREET ADDRESS 205 BRICKER HALL, 190 N. OVAL MALL
CITY-STATE-ZIP COLUMBUS OH

2.1 TITLE ☐ Change ☒ Addition
22 NAME GLIMCHER, DAVID J.
23 STREET ADDRESS 336 S. COLUMBIA
24 CITY-STATE-ZIP COLUMBUS, OH 43209

TITLE ☐ DELETE
NAME BARACH, PHILIP
STREET ADDRESS 8044 MONTGOMERY RD. SUITE 335 W.
CITY-STATE-ZIP CINCINNATI OH

3.1 TITLE ☐ Change ☒ Addition
32 NAME ZANTELO, FRED A.
33 STREET ADDRESS 2498 SHERWOOD RD
34 CITY-STATE-ZIP COLUMBUS, OH 43209

TITLE ☐ DELETE
NAME BIRCKHEAD, OLIVER
STREET ADDRESS PINE BANK CENTER STE 1000, 201 E. 5TH ST.
CITY-STATE-ZIP CINCINNATI OH

4.1 TITLE ☐ Change ☒ Addition
42 NAME TERRY A. SCHREINER
43 STREET ADDRESS 20 S. THIRD ST.
44 CITY-STATE-ZIP COLUMBUS, OH 43215

TITLE ☐ DELETE
NAME GITLITZ, GARY B
STREET ADDRESS 2590 BRENTWOOD
CITY-STATE-ZIP COLUMBUS OH 43209

5.1 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Terry A. Schreiner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY A. SCHREINER 4/17/96 614-621-9000
SR. V.P./CFO

Date

Daytime Phone #

CR2E034 (12/95)