2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 24, 2000 8:00 am Secretary of State DOCUMENT # **F94000002062** MOODY/NOLAN LTD., INC. 03-24-2000 90067 016 \*\*\*150.00 Principal Place of Business Mailing Address 1776 E. BROAD ST. · F. BROAD ST. COLUMBUS OH 43203-2039 ...... OH 43203 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 31-1256984 Not Applicable Country Country \$8,75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6.. Name and Address of Current Registered Agent Name EXTEIN, MARK D Street Address (P.O. Box Number is Not Acceptable) 111 N. ORANGE AVE., SUITE 1800 ORLANDO FL 32802 Zıp Code City 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **₩** Addition TITLE ☐ Defete TITLE NOLAN, HOWARD E NAME EILEEN M. GOODMAN NAME 2674 HENTHORN ROAD STREET ADDRESS 1705 CARILLON PARK DR. STREET ADDRESS CITY-ST-78 COLUMBUS 4322/ CITY-ST-ZIP ORLANDO FL 32765 Addition 🔽 Change ☐ Delete TITLE TITLE ANDERSON A. STALLWORTH MOODY, CURTIS J NAME NAME INDIAN SPRINGS 10059 STREET ADDRESS 3887 SUNBURY RD. STREET ADDRESS CITY-ST-ZIP CINCINNATI OH 45241 CITY-ST-ZIP COLUMBUS OH 43219 **X** Addition ☐ Change TITLE ☐ Delete TITLE J. WILLIAM. MILLER LARRIMER, ROBERT K NAME 2556 EAST BROAD ST STREET ADDRESS 1521 GRENOBLE RD. STREET ADDRESS CITY-ST-7/P BEXLEY DH 43209 COLUMBUS OH 43221 CITY-ST-ZIP Addition Addition ☐ Change ☐ Delete TITLE GERTRUDE B. NOLAN PRYOR, PAUL F NAME 1705 CARILLON PARK DR STREET ADDRESS **428 SWEETGUM WAY** STREET ADDRESS FL CITY-ST-ZIP ORLANDO 32765 CITY-ST-ZIP WESTERVILLE OH 43081 X Addition ☐ Change ☐ Delete TITLE TITLE ALDEN M MCGEE KATHLEEN H RANSIEL NAME NAME SANDSTONE PL 1346 STREET ADDRESS STREET ADDRESS **66 THURMAN AVE** 43081 CITY-ST-ZIP COLLIMBUS CITY-ST-ZIP COLUMBUS OH 43206 Change X Addition ☐ Delete TITLE TITLE **ELAINE S MOODY** NAME NAME STREET ADDRESS 3887 SUNBURY RD STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43219 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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