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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400002905 1. Corporation Name

EXCELLENCE IN MOTIVATION, INC.

Principal Place of Business	Mailing Address
6 NORTH MAIN ST., STE. 370	6 NORTH MAIN ST., STE. 370 DAYTON OH 45402

Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90038 042 ***150.00



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Principal Place	of Business	Mailing Address					1 1251126 (118 1511) 21501 9211 3211	an 91	,	
6 NORTH MAIN ST., STE. 370 6 NORTH MAIN ST., STE. 370 DAYTON OH 45402 DAYTON OH 45402			70				DO NOT WRIT	E IN THIS	SPACE_	
							3. Date Incorporated or Qualifed 06/03/1994			
2. Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number		17	Applied For
<u>.</u>	26						31-1387 <u>432</u>			lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					E Cartifecto of Status Degized		• -	Additional
22		27	· · .				5. Certifcate of Status Desired	<u> </u>	Fee F	Required
City & State	9	City & State					6. Election Campaign Financing	П	\$5.0	🕽 Мау Ве
23		28					Trust Fund Contribution	<u> </u>	Adder	to Fees
Zip	Country	Zip	Cou	ntry			8. This corporation owes the curre	nt year Inte		-
24	25	29	30				Personal Property Tax.		□Yes	□No
	9. Name and Address of Current	Registered Agent					10. Name and Address of New Re	gistered A	<u>lgent</u>	
T. 15	ODENITIOE HALL CODDODATION	CVCTEM INC		81	Name					
	PRENTICE-HALL CORPORATION	STOTEM, INC.		82	Street A	ddres	ss (P.O. Box Number is Not Acceptate	ole)		
	HAYS ST., STE. 105						<u> </u>			
IALL	AHASSEE FL 32301			83			•			
				84	City				85 Zij	Code
			_		•			<u> FL</u>		
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	t Fiorida. Such change was au	tnonzed	יעם נ	tne como	ration	ration submits this statement for the policy board of directors. I hereby accept	the appoin	itment as	registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered	Agen	t signature re	quired v	when reinstating)	DATE		
12.	OFFICERS AND	``	13.				ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECT	TORS IN 12
TITLE	CP	DELETE	1.1 Π	TLE		•			Change	e Addition
NAME	THOMAS, JARRETT N		1.2 N	AME						
STREET ADDRESS	1300 BRITTANY HILLS DR.		1.3 S	TREET	ADORESS					
CITY-ST-ZIP	DAYTON OH 45459			TY-ST			,			
TITLE	S	☐ DELETE	2.1 Ti						Change	e
NAME	SEBALY, JON		2.2 N	AME						
STREET ADDRESS	31 WALNUT LANE		2.3 5	TREET	ADDRESS					
*CITY-ST-ZIP	DAYTON OH 45419			iTY-S	- 1			, ,	-	
TITLE	۷T	DELETE	3.1 TI			< v	7-5-		Chang	e
NAME	DRIBIN, DEBRAH		3.2 N	AME	ļ	-70	PRANCE SCHWIETER	MAN		
STREET ADDRESS	1800 TIMBER CREEK COURT		3.3 S	TREET	ADDRESS	9.	OI EMERALD AVE.			
CITY-ST-ZIP	DAYTON OH		3.4. 0	ITY-S	T-ZIP	C.	DLOWATER OH	45828		
TITLE	D	☐ DELETE	4.1 TI						☐ Chang	e
NAME	MILLER, ROBERT		4. 2 N	IAME	Į					
STREET ADDRESS	2873 CIRCLEWOOD LANE		•		ADDRESS					
CITY-ST-ZIP	DAYTON OH		B	TY-S						
TITLE	VD	☐ DELETE	5.1 T						☐ Chang	e Addition
NAME	SMITH, HOWARD		5.2 N		1					
STREET ADDRESS	471 ROSELAKE DRIVE		5.3 S	TREET	TADDRESS					
CITY-ST-ZIP	CENTERVILLE OH		5.4 C	ITY-S	r-ZIP					
TITLE		☐ DELETE	6.1 T						☐ Chang	e Addition
NAME			6.2 N	AME	Ì					
STREET ADDRESS			6.3 \$	TREET	FADDRESS					

6.4 CITY-ST-ZiP 14. 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 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 trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an endress with all other like empowered.

SIGNATURE: