

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000004263

FILED
Feb 07, 2003
Secretary of State

Entity Name: THORSON BAKER & ASSOCIATES, INC.

Current Principal Place of Business:

3030 W STREETSBORO RD
RICHFIELD, OH 44286 US

New Principal Place of Business:

Current Mailing Address:

3030 W STREETSBORO RD
RICHFIELD, OH 44286 US

New Mailing Address:

FEI Number: 34-1739418

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T 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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PTV () Delete
Name: THORSON, MICHAEL G
Address: 2863 LAKELAND PARKWAY
City-St-Zip: SILVER LAKE, OH 44224

Title: CVS () Delete
Name: BAKER, GORDON R
Address: 1114 STURBRIDGE DRIVE
City-St-Zip: MEDINA, OH 44256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CVS (X) Change () Addition
Name: BAKER, GORDON R
Address: 1247 BRANDYWINE DRIVE
City-St-Zip: MEDINA, OH 44256

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GORDON BAKER

CVS

02/07/2003

Electronic Signature of Signing Officer or Director

Date