

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2005 8:00 am
Secretary of State

03-22-2005 90008 048 ***150.00

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1. Entity Name

CARDINAL REALTY COMPANY OF OHIO



Principal Place of Business

6954 AMERICANA HIGHWAY
REYNOLDSBURG, OH 43068

Mailing Address

6954 AMERICANA HIGHWAY
REYNOLDSBURG, OH 43068



02092005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

31-1262096

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
FORT LAUDERDALE, FL 33324

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME STROHM, BRUCE C
STREET ADDRESS TWO NORTH RIVERSIDE PLAZA, STE 400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE EVP
NAME FOX, LESLIE R
STREET ADDRESS TWO NORTH RIVERSIDE PLAZA, STE 400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE SVP
NAME MCHUGH, MICHAEL J
STREET ADDRESS TWO NORTH RIVERSIDE PLAZA, STE 400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE V
NAME POTTS, TAMRA L
STREET ADDRESS 6954 AMERICANA PARKWAY
CITY-ST-ZIP REYNOLDSBURG, OH 43068

TITLE VASD
NAME DUWE, YASMINA
STREET ADDRESS TWO NORTH RIVERSIDE PLAZA, STE 400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Tamra L. Potts*

TAMRA L. POTTS

MAR 1 2005

Date

Daytime Phone #

6145755192