

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

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000004901 (3)

1. Corporation Name
CRSI SPV 20246, INC.

Principal Place of Business
6954 AMERICANA PARKWAY
REYNOLDSBURG OH 43068

Mailing Address
6954 AMERICANA PARKWAY
REYNOLDSBURG OH 43068



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/10/1995

4. FEI Number
31-1448634

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 its applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PCD
NAME	BARTLING, JOHN B
STREET ADDRESS	6954 AMERICANA PARKWAY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	VT
NAME	SOSH, MICHAEL F
STREET ADDRESS	6954 AMERICANA PARKWAY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	VD
NAME	SELID, PAUL R
STREET ADDRESS	6954 AMERICANA PARKWAY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	V
NAME	KOEGLER, RONALD P
STREET ADDRESS	6954 AMERICANA PARKWAY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	SD
NAME	MEYER, JEFFREY D
STREET ADDRESS	6954 AMERICANA PARKWAY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	CFOV
NAME	THOMPSON, MARK D
STREET ADDRESS	6954 AMERICANA PARKWAY
CITY-ST-ZIP	REYNOLDSBURG OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD
1.2 NAME	Bartling, John B
1.3 STREET ADDRESS	6954 Americana Parkway
1.4 CITY-ST-ZIP	Reynoldsburg, OH 43068
2.1 TITLE	VD
2.2 NAME	Thompson, Mark D
2.3 STREET ADDRESS	6954 Americana Parkway
2.4 CITY-ST-ZIP	Reynoldsburg, OH 43068
3.1 TITLE	V
3.2 NAME	Koegler, Ronald P
3.3 STREET ADDRESS	6954 Americana Parkway
3.4 CITY-ST-ZIP	Reynoldsburg, OH 43068
4.1 TITLE	VT
4.2 NAME	Sosh, Michael F
4.3 STREET ADDRESS	6954 Americana Parkway
4.4 CITY-ST-ZIP	Reynoldsburg, OH 43068
5.1 TITLE	V
5.2 NAME	Selid, Paul R
5.3 STREET ADDRESS	6954 Americana Parkway
5.4 CITY-ST-ZIP	Reynoldsburg, OH 43068
6.1 TITLE	VS
6.2 NAME	VanAuken, Bradley A
6.3 STREET ADDRESS	6954 Americana Parkway
6.4 CITY-ST-ZIP	Reynoldsburg, OH 43068

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 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:

Bradley A. Van Auken

CR2E034 (10/97)