

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 # **F95000004948 (4)**

1. Corporation Name
CRSI SPV 20487, INC.

Principal Place of Business
**6954 AMERICANA PKWY.
REYNOLDSBURG OH 43068**

Mailing Address
**6954 AMERICANA PKWY.
REYNOLDSBURG OH 43068**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/12/1995	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 31-1448117	Applied For ☐ Not Applicable
23 Zip	24 Country	28 Zip	29 Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
25		30		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

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

10. Name and Address of New Registered Agent
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 607.0507 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 of Registered Agent or Director

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	BARTLING, JOHN B		1.2 NAME	Bartling, John B	
STREET ADDRESS	6954 AMERICANA PARKWAY		1.3 STREET ADDRESS	6954 Americana Parkway	
CITY-ST-ZIP	REYNOLDSBURG OH 43068		1.4 CITY-ST-ZIP	Reynoldsburg, OH 43068	
TITLE	CFOD	☒ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	THOMPSON, MARK D		2.2 NAME	Thompson, Mark D	
STREET ADDRESS	6954 AMERICANA PARKWAY		2.3 STREET ADDRESS	6954 Americana Parkway	
CITY-ST-ZIP	REYNOLDSBURG OH		2.4 CITY-ST-ZIP	Reynoldsburg, OH 43068	
TITLE	MD	☒ DELETE	3.1 TITLE	V	☐ Change ☒ Addition
NAME	SELD, PAUL R		3.2 NAME	Koegler, Ronald P	
STREET ADDRESS	6954 AMERICANA PKWY.		3.3 STREET ADDRESS	6954 Americana Parkway	
CITY-ST-ZIP	REYNOLDSBURG OH		3.4 CITY-ST-ZIP	Reynoldsburg, OH 43068	
TITLE	V	☒ DELETE	4.1 TITLE	VT	☐ Change ☒ Addition
NAME	KOEGLER, RONALD P		4.2 NAME	Sosh, Michael F	
STREET ADDRESS	6954 AMERICANA PKWY.		4.3 STREET ADDRESS	6954 Americana Parkway	
CITY-ST-ZIP	REYNOLDSBURG OH		4.4 CITY-ST-ZIP	Reynoldsburg, OH 43068	
TITLE	VT	☒ DELETE	5.1 TITLE	V	☐ Change ☒ Addition
NAME	SOSH, MICHAEL F		5.2 NAME	Seld, Paul R	
STREET ADDRESS	6954 AMERICANA PKWY.		5.3 STREET ADDRESS	6954 Americana Parkway	
CITY-ST-ZIP	REYNOLDSBURG OH		5.4 CITY-ST-ZIP	Reynoldsburg, OH 43068	
TITLE	SD	☒ DELETE	6.1 TITLE	VS	☐ Change ☒ Addition
NAME	MEYER, JEFFREY D		6.2 NAME	VanAuken, Bradley A	
STREET ADDRESS	6954 AMERICANA PARKWAY		6.3 STREET ADDRESS	6954 Americana Parkway	
CITY-ST-ZIP	REYNOLDSBURG OH		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 or changed, or on an attachment with an address.

SIGNATURE:

Bradley A. Van Auken

CR2E034 (10/97)