2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000452

Entity Name: OHIO SAVINGS INSURANCE AGENCY, INC.

FILED Jul 06, 2004 Secretary of State

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
OHIO SAVII	•	301 E 9TH ST #200	·		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
1801 EAST NINTH STREET OH99-0209 CLEVELAND, OH 44114			1801 EAST NINTH STREET OH99-0214 CLEVELAND, OH 44114		
FEI Number:	34-1092834	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SADOCK, JAMES JR 5550 GLADES RD #100 BOCA RATON, FL 33431 US 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:					
		Signature of Registered Agent	İ	Date	
Election Cam	paign Financing 1	Frust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DVS () D GOLDBERG, ROI OHIO SAVINGS F CLEVELAND, OH	BERT PLAZA, 1801 E 9TH ST #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP () D GOLDBERG, DAV OHIO SAVINGS P CLEVELAND, OH	/ID PLAZA, 1801 E 9TH ST #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GOLDBERG, GE	LAZA, 1801 E 9TH ST #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FREIMUTH, MAR	LAZA, 1801 E 9TH ST #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PRESBY, ALAN V	LAZA, 1801 E 9TH ST #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	YESKO, JOSEPH	LAZA, 1801 E 9TH ST #200	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MARC W. FREIMUTH S 07/06/2004