

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

FILED

Feb 25 1998 8:00am
Secretary of State

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

F96000004635 (6)



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
6954 AMERICANA PKWY REYNOLDSBURG OH 43068		6954 AMERICANA PKWY REYNOLDSBURG OH 43068	
21	Suite, Apt. #, etc.	27	City & State
22	City & State	28	Zip
23	Country	29	Country
24	Country	30	Country

3. Date Incorporated or Qualified 09/10/1998	
4. FEI Number 31-1475361	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	

9. Name and Address of Current Registered Agent	
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

I, the undersigned, being a resident of the State of Florida, do hereby certify that 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: Barling John B DATE: 09/10/1998
(NOTE: Registered Agent signature required when changing registered agent.)

12. OFFICERS AND DIRECTORS	
TITLE	CPD
NAME	BARTLING, JOHN B JR
STREET ADDRESS	6954 AMERICANA PKWY
CITY-ST-ZIP	REYNOLDSBURG OH 43068
TITLE	VT
NAME	SOSH, MICHAEL F
STREET ADDRESS	6954 AMERICANA PKWY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	VCFD
NAME	THOMPSON, MARK D
STREET ADDRESS	6954 AMERICANA PKWY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	V
NAME	KOEGLER, RONALD P
STREET ADDRESS	6954 AMERICANA PKWY
CITY-ST-ZIP	REYNOLDSBURG OH
TITLE	VD
NAME	SELID, PAUL R
STREET ADDRESS	6954 AMERICANA PKWY
CITY-ST-ZIP	REYNOLDSBURG OH 43068
TITLE	SD
NAME	MEYER, JEFFREY D
STREET ADDRESS	6954 AMERICANA PKWY
CITY-ST-ZIP	REYNOLDSBURG OH

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	VD
1.3 STREET ADDRESS	6954 AMERICANA PKWY
1.4 CITY-ST-ZIP	REYNOLDSBURG OH 43068
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	V
2.3 STREET ADDRESS	Koepler, Ronald P
2.4 CITY-ST-ZIP	6954 Americana Parkway Reynoldsburg, OH 43068
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	VT
3.3 STREET ADDRESS	Sosh, Michael F
3.4 CITY-ST-ZIP	6954 Americana Parkway Reynoldsburg, OH 43068
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	V
4.3 STREET ADDRESS	Selid, Paul R
4.4 CITY-ST-ZIP	6954 Americana Parkway Reynoldsburg, OH 43068
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	VD
5.3 STREET ADDRESS	VanAken, Bradley A
5.4 CITY-ST-ZIP	6954 Americana Parkway Reynoldsburg, OH 43068
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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. VanAken

CR2E034 (10/97)