

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 30, 1999 8:00 am
Secretary of State

03-30-1999 90046 049 ***150.00

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1. Corporation Name

LIFETIME CAPITAL INC.

Principal Place of Business

1 PRESTIGE PLACE, STE. 210
MIAMISBURG OH 45342

Mailing Address

1 PRESTIGE PLACE, STE. 210
MIAMISBURG OH 45342

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/09/1998

4. FEI Number

86-0873350

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 the current year intangible
Personal Property Tax.

☐☒

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

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT ☒ DELETE

NAME ZIMA, NANETTE M

STREET ADDRESS 156 MAPLE ST., #57

CITY-ST-ZIP VANDALIA OH 45377

TITLE S ☒ DELETE

NAME KORDOL, DOUGLAS A

STREET ADDRESS 2071-C LAKEWOOD

CITY-ST-ZIP KETTERING OH 45420

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director/Pres./Secretary ☒ Change ☐ Addition

1.2 NAME Roger W. Lange

1.3 STREET ADDRESS One Prestige Pl., Ste. 210

1.4 CITY-ST-ZIP Miamisburg, Ohio 45342

2.1 TITLE Treasurer ☒ Change ☐ Addition

2.2 NAME Cynthia L. Kieninger

2.3 STREET ADDRESS One Prestige Pl., Ste. 210

2.4 CITY-ST-ZIP Miamisburg, Ohio 45342

3.1 TITLE Assistant Secretary ☐ Change ☒ Addition

3.2 NAME Shausta A. Merrill

3.3 STREET ADDRESS One Prestige Pl., Ste. 210

3.4 CITY-ST-ZIP Miamisburg, Ohio 45342

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Roger W. Lange

3/24/99

(937) 428-0360

Daytime Phone #

CR2E034 (11/98)