

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002093

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: THE WASSERSTROM CO.

**Current Principal Place of Business:**

477 S. FRONT ST  
COLUMBUS, OH 43215

**New Principal Place of Business:**

**Current Mailing Address:**

477 S. FRONT ST  
COLUMBUS, OH 43215

**New Mailing Address:**

FEI Number: 31-4335700      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TELERY, GARY  
9400 N. BUSCH DR  
JACKSONVILLE, FL 32218      US

**Name and Address of New Registered Agent:**

TELEKY, GARY  
9400 N. BUSCH DR  
JACKSONVILLE, FL 32218      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: GARY TELEKY

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WASSERSTROM, RODNEY  
Address: 477 S. FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

Title: V ( ) Delete  
Name: VERMILLION, URSULA  
Address: 477 S. FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

Title: V ( ) Delete  
Name: MYERS, SHELLY  
Address: 477 S. FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

Title: VP ( ) Delete  
Name: RABE, DEBORAH  
Address: 477 S. FRONT ST.  
City-St-Zip: COLUMBUS, OH 43215

Title: CFO ( ) Delete  
Name: MANGELSON, GARY  
Address: 477 SOUTH FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: WASSERSTROM, RODNEY  
Address: 477 S. FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

Title: EVP (X) Change ( ) Addition  
Name: VERMILLION, URSULA  
Address: 477 S. FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

Title: EVP (X) Change ( ) Addition  
Name: MYERS, SHELLY  
Address: 477 S. FRONT ST  
City-St-Zip: COLUMBUS, OH 43215

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEBORAH F. RABE

VP

04/28/2009

Electronic Signature of Signing Officer or Director

Date