

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90078 017 ****61.25



DO NOT WRITE IN THIS SPACE

DOCUMENT # F98000003511

1. Entity Name

EMPLOY-ABILITY UNLIMITED, INC.

Principal Place of Business

Mailing Address

5555 PARKCENTER CIRCLE, STE. 200
 DUBLIN OH 43017

5555 PARKCENTER CIRCLE, STE. 200
 DUBLIN OH 43017-7510

2. Principal Place of Business

3. Mailing Address

10140 Linn Station Road

10140 Linn Station Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Louisville, KY 40223

Louisville, KY 40223

Zip

Country

40223

Jefferson

Zip

Country

40223

Jefferson

4. FEI Number

31-1464800

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

8. 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MULLARKEY, JAMES	
STREET ADDRESS	5555 PARKCENTER CIRCLE, STE. 200	
CITY-ST-ZIP	DUBLIN OH 43017	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	STURTZ, ANNE M	
STREET ADDRESS	5555 PARKCENTER CIRCLE, STE. 200	
CITY-ST-ZIP	DUBLIN OH 43017	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	KING, KEVIN H	
STREET ADDRESS	5555 PARKCENTER CIRCLE, STE. 200	
CITY-ST-ZIP	DUBLIN OH 43017	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	President/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ronald G. Geary	
STREET ADDRESS	10140 Linn Station Road	
CITY-ST-ZIP	Louisville, KY 40223	
TITLE	Secretary/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	E. Halsey Sandford	
STREET ADDRESS	10140 Linn Station Road	
CITY-ST-ZIP	Louisville, KY 40223	
TITLE	Treasurer/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ralph G. Gronefeld, Jr.	
STREET ADDRESS	10140 Linn Station Road	
CITY-ST-ZIP	Louisville, KY 40223	
TITLE	VicePresidentss	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jeffrey M. Cross	
STREET ADDRESS	10140 Linn Station Road	
CITY-ST-ZIP	Louisville, KY 40223	
TITLE	Assistant Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David S. Waskey	
STREET ADDRESS	10140 Linn Station Road	
CITY-ST-ZIP	Louisville, KY 40223	
TITLE	Assistant Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gregory T. Rousos	
STREET ADDRESS	10140 Linn Station Road	
CITY-ST-ZIP	Louisville, KY 40223	

CR2E037 (9/99)

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Handwritten Signature

Mary D. Willey, Assistant Secretary 04/13/00 502-394-2100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

498000003511
00085872

EMPLOY-ABILITY UNLIMITED, INC.

OFFICER & TRUSTEES

<u>OFFICERS</u>	<u>NAME</u>	<u>STREET</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP</u>
President	Ronald G. Geary	10140 Linn Station Road	Louisville	Kentucky	40223
Secretary	E. Halsey Sandford	10140 Linn Station Road	Louisville	Kentucky	40223
Treasurer	Ralph G. Gronefeld, Jr.	10140 Linn Station Road	Louisville	Kentucky	40223
Vice President	Jeffrey M. Cross	10140 Linn Station Road	Louisville	Kentucky	40223
Vice President	Todd Graybill	10140 Linn Station Road	Louisville	Kentucky	40223
Vice President	Barbara A. Winters	10140 Linn Station Road	Louisville	Kentucky	40223
Assistant Secretary	David S. Waskey	10140 Linn Station Road	Louisville	Kentucky	40223
Assistant Secretary	Mary D. Wiley	10140 Linn Station Road	Louisville	Kentucky	40223
Assistant Treasurer	Gregory T. Rousos	10140 Linn Station Road	Louisville	Kentucky	40223

<u>TRUSTEES</u>	<u>NAME</u>	<u>STREET</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP</u>
Director	Ronald G. Geary	10140 Linn Station Road	Louisville	Kentucky	40223
Director	E. Halsey Sandford	10140 Linn Station Road	Louisville	Kentucky	40223
Director	Ralph G. Gronefeld, Jr.	10140 Linn Station Road	Louisville	Kentucky	40223