## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINST	ORATION TATEMENT	K Se DIVIS	DEPARTMENT OF STATE atherine Harris ecretary of State ION OF CORPORATIONS		FILED  01 AUG 27 PH 4: 32	
1. Corporation					SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Ve	nture One	C002	+ (uction;+nc	7	00004572387 -09/06/0101046012 ***1050.00 ***1050.1	- <b>4</b> 00
2. Principal Of	· _	3. Malling Off	ice Address		1001	
	West Main St.	· · · · · · · · · · · · · · · · · · ·	me	_	44-01	
Suite, Apt. #. et	tc.	Suite, Apt. #, e	tc.	A. Date Incom	porated or Qualified	<del></del>
City & State		City & State			iness in Florida 5 - 1996	ı
(a)	avia OH	Oily a Custo	Same	5. FEI Numbe		
Zip.	Country	Zip	Country	56		
421	03 USA	\$	ione some		SB.75 Additional Fee re for a Certificate of St	
		<b>7.</b> Na	me and Address of Current Regist	ered Agent		
1	Name UCC Filing and Search Services Inc.					
	Street Address (P.O. Box Number is Not Acceptable)					
·	526 E Park					
	Sulte, Apt. #, Etc.					
(	Tallahassee				State Zip Code FL 32301	
B. I being enr	pointed the registered agent of the above		ation, are familiar with and accord the	obligations of section		
Signature of Registered Age	ent <u>Hison</u> H	GISTERED AGE	χ		Date 8/24/01	
9. Names and	d Street Addresses of Each Officer and	or Director (Flori	da nonprofit corporations must list at	least 3 directors)		
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip	
ρ	Michael W. Schultz		333 W Main St;		Batavia OH 451	03
11/5/	George J. Kova	ch III	333 W. Main	St'	Batavi a Olt 4510	33
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V/. J \		1				
V/						

SIGNATURE: SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DELO