2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000002530 Jun 09, 2000 8:00 am 1. Entity Name Secretary of State PETROLEUM REALTY CORPORATION 06-09-2000 90011 035 ***550.00 Principal Place of Business Mailing Address 88 WEST MAIN STREET 88 WEST MAIN STREET COLUMBUS OH 43215 COLUMBUS OH 43215-5097 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name and the second s CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition Change TITLE Delete TITLE CLIMCHER, DAVID J NAME **88 WEST MAIN STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43215 CITY-ST-7IP PDCC Delete ☐ Change Addition TITLE BITTEL, STEPHEN NAME **88 WEST MAIN STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43215 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE BASKIN, MICHAEL D NAME NAME 88 WEST MAIN STREET STREET ADDRESS STREET ADDRESS COLUMBUS OH 43215 CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE IHLENDORF, RICHARD M NAME NAME **88 WEST MAIN STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH 43215 ☐ Addition ☐ Change TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Inlenderf.

5/30/00 614-2

Daytime Phone #