


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91064 016 ***150.00

DOCUMENT # F99000005072

1. Entity Name
HOGUE-WARREN-ZIMMERMANN CO.




Principal Place of Business
**40 WEST CRESCENTVILLE ROAD
CINCINNATI, OH 45246**

Mailing Address
**40 WEST CRESCENTVILLE ROAD
CINCINNATI, OH 45246**

DO NOT WRITE IN THIS SPACE

34084703



04272004 No Chg-P CR2E034 (10/03)

4. FEI Number 31-0550548	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired: <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KUCZEK, CHRISTOPHER S 40 WEST CRESCENTVILLE ROAD CINCINNATI, OH 45246
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD HOGUE, ROBERT C 40 WEST CRESCENTVILLE ROAD CINCINNATI, OH 45246
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 607, 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 life empowered.

SIGNATURE:  **ROBERT C. HOGUE** **4-27-04** **513-671-7200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #