**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

## Jan 30, 2001 8:00 am **DOCUMENT # G72981 Secretary of State** 1. Entity Name į REPUBLIC DEVELOPMENT CORPORATION OF OHIO, INC. 01-30-2001 90047 014 \*\*\*150.00 Principal Place of Business Mailing Address C/O STEPHEN H. REYNOLDS C/O STEPHEN H. REYNOLDS 111 E. MADISON, 23RD FL 111 E. MADISON 23RD SL TAMPA FL 33602 TAMPA FL 33602 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 34-1417493 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REYNOLDS, STEPHEN H. Street Address (P.O. Box Number is Not Acceptable) 111 EAST MADISON STREET 1ST FLOOR TOWER, 23RD FLOOR **TAMPA FL 33602** Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back). Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ■ Addition TITLE ☐ Delete TITLE ☐ Change ARNOS, RICHARD D. NAME NAME 3150 REPUBLIC BLVD., NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **TOLEDO OH 43615** ☐ Addition ☐ Delete Change TITLE TITLE MITCHELL, STEPHEN R. NAME NAME 3150 REPUBLIC BLVD., N, #3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TOLEDO OH 43615** TITLE ☐ Delete TITLE ☐ Change Addition MITCHELL, WILLIAM NAME NAME \_ 3150 REPUBLIC BLVD. N., #3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TOLEDO OH 43615** CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition HENLINE, KATHY NAME NAME 3150 REPUBLIC BLVD, N. #3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TOLEDO OH 43615** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CARTER, EUGENE T. NAME NAME STREET ADDRESS 3150 REPUBLIC BLVD., N. #3 STREET ADDRESS CITY-ST-ZIP **TOLEDO OH 43615** CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE ARNOS, RICHARD L. NAME NAME 3150 REPUBLIC BLVD., N, #3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TOLEDO OH 43615** 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 clirector 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.