PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS				
DOCUMENT # H24966 (4)						
ADVAN	ced distribl	JTION SYSTEM	` '		I (BB) Bij kija neji bija jana ama	SALE BLAN BLAN BLAN BLAN A BLU BLAN BLAN CO.
Principal Place of Business Mailing Address						
4181 ARLINGATE PLAZA COLUMBUS OH 43228 US			PO BOX 28228 COLUMBUS OH 43228 US		3. Date Incorporated or Qualifie	d 3a. Date of Last Report
2 Principal P	lace of Business		2a. Mairing Address		10/11/1984 4. FEI Number	04/26/1995
21	**************************************	····	26]		31-1116906	Applied For Not Applicable
Suite, Apt 22			Suite Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	<u></u> -	ountry	Zip	Country	8. This corporation has liability for	or intangible tax under s. 199 032,
24	9. Name and A	ddress of Current F	29 legistered Agent	30	Florida Statutes 10. Name and Address of New F	Yes No Registered Agent
	CORPORATION : 0 S. PINE ISLAN			81 Name		
	INTATION FL 333				Address (P.O. Box Number is Not Accept	able)
				83		
11 Pursuant t	to the provisions of	Sactions 607 0502 a	nd 607 1509 Florida Statut	84 City	corporation submits this statement for the	FL 85 Zip Code
OTHER OF IS	sgistered agent, or	DOMESTIC STATE OF	Florida Such change was a ns of, Section 607.0505, Flo	iumarizea ov me corr	corporation submits this statement for the oration's board of directors. Thereby acce	purpose of changing its registered ppt the appointment as registered
SIGNATURE	Signature: tq a.d or pero :	financial registered agent a	id the Jappis ible (NC)	E. Rugistered Agent signaturi	repured week noostaliaat	[IA]E
12. Title	PD	OFFICERS AND [DELETE	13.	ADDITIONS/CHANGES TO OFF	ICLES AND DIRECTORS IN 12
NAME	REED, JAMES		DECENT	1.2 NAME	PD LEO BLUMENAUER	Z Change M Addition දින්
STREET ADDRESS CHTY-ST-ZIP	4181 ARLINGA COLUMBUS O			13 STREET ADDRESS	4181 ARLINGATE A	PLAZA I
TITLE	D		DELFIE	2.1 TITLE	COLUMBUS, OHIO	43228
NAME STREET ADORESS	USHER, JONA 400 TECHNEC	thon G. Enter Drive / S'	TE . 200	2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	MILLFORD OH		IE • 200	2 4 CITY - ST - ZIP		
TITLE NAME	V SMITH, CRAIG		DELETE	3 1 TITLE 3 2 NAME		Change Addition
STREET ADDRESS	4181 ARLINGA	TE PLAZA		33 STREET ADDRESS		
CITY-ST-ZIP TITLE	COLUMBUS O	<u>H</u>	DELFIE	3.4 CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME	FRAZIER, WAD	Æ	L	4 2 NAME		L Change L Association
STREET ADDRESS	4181 ARLINGA COLUMBUS O			4 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D COLOMBOS O	П	DELFTE	4.4 CiTY - ST - ZIP 5.1 TiTLE	<u> </u>	Change Add tion
NAMÉ Storey Apogreso	BAKER, JACKS		F 200	5.2 NAME	JOHN P. DELAVAN	
STREET ADDRESS CITY-ST-ZIP	MILFORD OH	enter drive, sti	E 200	5.3 STREET ADDRESS 5.4 CITY - S1 - ZIP	MILFORD, OHIO	
TITLE			DELETE	61 TILLE	···-··································	Change Addition
NAME STREET ADDRESS				6.2 NAME		İ
CITY-ST-ZIP				6 3 STREET ADDRESS 6 4 CHTY - ST - ZIP		
rurinei cei	азу шаг шели отна	mon indicated on for	CANADAL FEBORE OF SUIPPLICATE	riished and does not	qualify for the exemption stated in Section rue and accurate and that my signature sh	solt han in also manus to a it if it is in it.
made unde that my na	er oath, that Fam ar me appears in Bloc	n officer or director of ok 12 or Brook is if ch	I the corporal on or the rece langed or on an altachmer	eiver or trustee empoy it with an address	recently execute this report as required by	Chapter 617 Florida Statutes, and
CICNIATI	IIDE.	·/(> W	THE FOR	121ER 6/24/96	(614)275-6900
SIGNATI		ATURE AND TYPED OR PE	NTED NAME OF SIGNING OFFICER	OR DIRECTOR	12-1-12	(617,213 6100)