FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 05 1998 8:00am Secretary of State

1. Corporation	MENT # H66818 CENTERS, INC.	3 (6)						
Principal Place of Business C/O THE PRENTICE-HALL CORPORATION SYSTEM 209 E STATE STREET COLUMBUS OH 43215 Mailing Address C/O THE PRENTICE-HALL 209 E STATE STREET COLUMBUS OH 43215			L CORPORATI	ion system	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address			-74		07/12/1985		Applied For	┨
21		26			31-1147986	<u>}</u> -	lot Applicable	1
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	1
22		City & State				Required	┨	
City & State		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zıp	Country	Zip	Country		8. This corporation owes or has paid the co			1
24	25	29	30		Personal Property Tax due June 30.	☐ Yes	□ No	Ţ
	9, Name and Address of Current		61	Name	10. Name and Address of New Registered	1 Agent	·····	┨
THE PRENTICE-HALL CORPORATION SYSTEM INC 1201 HAYES ST STE 105 TALLAHSSEE FL 32301			82 83		ess (P.O. Box Number is Not Acceptable)	-7-1		
		84	City	FI	85 Zir	Code	1	
office or re agent. I as SIGNATURE	to the provisions of Sections 607.05.02 egistered agent, or both, in the Steto or familiar with, and accept the obligat	of Florida, Such change was a tions of, Section 607,0505, Florida	authorized by orida Statutes	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing pointment a	its registered s registered]
12.		OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AN]8
TITLE	VD Casto, don M., III	☐ DELETE	1.1 TITLE			Change	Addition	1
NAME STREET ADDRESS	209 E. STATE ST.		1.2 NAME 1.3 STREET	***************************************				15
CITY-ST-ZIP	COLUMBUS OH		1.4 City-S	- 1				ľ
TITLE	PD	DELETE	2.1 TITLE	1-217		Change	☐ Addition	۲
NAME	BENSON, FRANK S., IN		2.2 NAME					
STREET ADDRESS	209 E. STATE ST.		2.3 STREET	ADDRESS				İ
CITY-ST-ZIP	COLUMBUS OH	T DOLLAR	2.4 CITY-5	T-ZIP			Autani	1
TITLE	CASTO, WILLIAM G.	DELETE	3.1 TITLE 3.2 NAME	į.		L Change	Addition	
NAME STREET ADDRESS	399 TAYLOR BLVD.,#103		3.3 STREET	Annoess				l
CITY-SY-ZIP	PLEASANT HILL CA		3.4. CITY-S					
TITLE	AS	DELETE	4.1 TITLE			Change	Addition	1
NAME	SCHOFIELD, HARLEY C.		4. 2 NAME					
STREET ADDRESS	209 E. STATE ST.		4.3 STREET ADORESS					
CITY-S1-ZIP	COLUMBUS OH		44 CITY - S	T-ZIP		·		4
TITLE		DELETE	5.1 THLE	j		Change	Addition	
NAME			5.2 NAME	*DDDF4C				
STREET ADDRESS			5.3 STREET					1
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-S 6.1 TITLE	1-211		☐ Change	Addition	1
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP				1

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or execute this report as required by Chapter 607, Florida Statutes: and that my name appears in

SIGNATURE:

m/8/2

FRANK, S. BENSON III

APR 2 2 1998

1014-208-5771