2004 FOR PROFIT CORPORATION

ANNUAL REPORT

FILED May 04, 2004 8:00 am Secretary of State 05-04-2004 90211 028 ***150.00

DOCU 1. Entity Nam FLORACI				05-04-2004 90211 028 ***150.00									
Principal Place of Business 191 W. NATIONWIDE BLVD. SUITE 200 COLUMBUS, OH 43215-2568				Mailing Address 191 W. NATIONWIDE BLVD. SUITE 200 COLUMBUS, OH 43215-2568				44044223					
2. Principal Place of Business				3. Mailing Address						i			
Suite, Apt. #, etc.				Suite, Apt. #, etc.				04132004	Chg-P	CR2E0	34 (10/03)		
City & State				City & State				4. FEI Number 31-1147				plied For t Applicable	
Zip	Country		7	Zip Cour		try				\$8.75 Add Fee Required			
6. Name and Address of Current Re				egistered Agent			7. Name and Address of New Registered Agent						
						Name							
THE PRENTICE-HALL CORPORATION SYSTEM INC 1201 HAYES ST STE 105						Street Address (P.O. Box Number is Not Acceptable)							
TALLAHS	SÉE. FL 3	32301										l	
· · · · · · · · · · · · · · · · · · ·					City FL Zip Code)		
SIGNATURE	E NOW!!!	or printed name of registered agent FEE IS \$150.00 4 Fee will be \$550.		f applicable. (NOTE 9. Election Campai Trust Fund Contr	gn Finar		\$ 5.	when reinstating) .00 May Be ed to Fees		DATE			
10.	VSD	OFFICERS AND	DIREC				D	ADDITIONS/C	HANGES TO OFF	ICERS AND			
TITLE NAME -	CASTO, DON M., III			☐ Delete	TITLE		1-	ON NANC	v c		☐ Change	Addition	
STREET ADDRESS						ET ADDRESS	BENSON, NANCY C. 191 W. NATIONWIDE BLVD., STE. 200						
CITY-ST-ZIP						-ST-ZIP	COLUMBUS, OH 43215-2568						
TITLE	PTD	ga jogi *		☐ Delete	TITLE		D				☐ Change	K] Addition	
NAME	BENSON, FRANK S., III							N, ANN C				_	
STREET ADDRESS						ET ADDRESS	1-7- ", 32-31, 512						
CITY-ST-ZIP	COLUMBUS, OH 432152568						COLU	MBUS, OH	43215-25	68			
TITLE	VD	*****		☐ Delete	TITLE)D				X Change	Addition	
NAME ~ STREET ADDRESS	CASTO, WILLIAM G NAM 399 TAYLOR BLVD.#103					et address	CAS	TO, WILLI	AM G.				
CITY-ST-ZIP						-ST-ZiP			LVD., #10 L. CA 94)		
TITLE				☐ Delete	TITLE		D	TORNI IIII	L CA 9		. Change	X Addition	
NAME STREET ADDRESS CITY-ST-ZIP				<i>50</i> 1844	NAM STRE		191		NANCY B. NWIDE BLV 43215-25		,-		
TITLE NAME				☐ Delete	TITLE	E .			.5225 25		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP						et address - St-Zip							
TITLE NAME				☐ Delete	TITLE	<u> </u>	,			<u></u>	☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				ب _{اق} ۔۔ ۔۔۔	STRE	et address -st-zip							
12. I hereby of indicated of the correct changed.	certify that the control of the cont	e information supplied with to receiver or trustee emplants the receiver or trustee emplants achment with an adductee.	this fill true a owered	ling does not qualify for and accurate and that m if to execute this report	the exe ny signat as requi	mption stature shall hered by Cha	ted in Se lave the s apter 607	ection 119.07(3)(i), same legal effect 7, Florida Statutes	Florida Statutes. as if made under of and that my name	I further cer path; that I a e appears it	tify that the in am an officer n Block 10 or	formation or director Block 11 if	

DON M. CASTO, III