FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** (6)SPRING PARK GROUP, INC. Principal Place of Business Mailing Address 13370 PROSPECT ROAD 13370 PROSPECT ROAD STRONGVILLE OH 44136 STRONGVILLE OH 44136 3. Date Incorporated or Qualified 3a. Date of Last Report 10/19/1987 03/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For / Wood ords 21 26 59-2809909 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Ζiρ Country 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **PUZZITIELLO, ROSS** 82 Street Address (P.O. Box Number is Not Acceptable) 1171 CLAYS TR OLDSMAR FL 34677 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed hence of registered agent and title it applicable (NOTE: Registered Agend signature Desire Zada mit 12 CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DP DELETE 1. 1 TIPLE [1] Change ☐ Addition NAME PUZZITIELLO, RICHARD A. 1.2 NAME STREET ADDRESS 13370 PROSPECT RD. 1.3 STREET ADDRESS STRONGSVILLE OH CITY-S1-ZIP 1.4 C/TY-ST-Z/P $\Pi \Pi_{\nu} E$ **VPSD** DELETE 2 1 T:TLE Change ■ Addition PUZZITIELLO JR., RICHARD NAME 2.2 NAME 13370 PROSPECT RD. STREET ADDRESS 2.3 STREET ADDRESS STRONGSVILLE OH CITY-SI-ZIP 2.4 CITY - ST - ZIF TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREE! ADDRESS 3.3 STREET ADDRESS CITY - \$1 - 21P 3.4 C-TY - ST - ZIP UILE DELETE 4.1 TrILE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY - ST - 21P THLE DELETE 5 1 111LE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CHTY - ST - ZIP TITLE DELETE 6 1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this certify that the information indicated or finis annual repoorath; that I am an officer or director of the corporation. nighed and does not qualify for the exemption stated in Section 119.07(3(k). Florida Statutes, Hurther half report is true and accurate and that my signature shall have the same legal effect as if made under so empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name ng is voluntarily furr supplemental and the corporation the receiver or tru: appears in Block 12 or Block 13 anged, or on an achment with an SIGNATURE: