LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS					SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR 17 PM 1:51			
\$ 188.								
	and Mailing Address ted Liability Company DOCU	JMEN1	Т# м97000	000742				
MID-VALLEY SUPPLY LLC]	ace of Business		
-	539 S. MAIN ST FINDLAY OH 45840					MAIN ST Y OH 458		
2 Principal Place of Business 2a. Mailing Address				<u>.</u>	Date Organized or Qualified			
Suite, Apt.	# etc.	Suite, A	.pt. #, etc.			11/12/1997 DE		
					4. FEI Number		Applied For	
City & Stat	te	City & St	City & State		31-1563294			Not Applicable
Zıp	Country	Zip	Cou	untry	5. Date of Last	Report	_	ate of Status Desired
 -	7. Name and Address of Curren	* Benistere	d Anent	<u></u>	04/24/:			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.				
	ant to the provisions of Sections 608.416 red office or registered agent, or both, in the							
	red agent, and accept the obligations.	IC OTOTO GIT	Mua oboronongo as.	5 domonted by ammin	ariye yote or a majo.	ny or me morniss	S. Frieroup a.	эсері ше арронішел
SIGNATU	RE(Registered Agent Acceptors	g Appearance all)	(NOTE: Registered Agent sign.	iałożo też) irt <u>ekt w^a ercze i sk</u> ałiń	el)	DATE,		
10. Title	Title Managing Members/Managers		Bus	siness Street Address		City,	, State and Z	Zip Code
MGR	PEIFFER, G.L.	539 S. M	AIN ST		FINDLAY OH			
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indicated or	reby certify that the information supplied von this annual report is true and accurate illty company or the receiver or trustee e	and that my	signature shall have th	ne same legal effect as	s if made under oatl	h; that I am a mar	naging memi	ber or manager of the

SIGNATURE AND TYPED ON PRINTED NAME OF DAVING MALAGING MEMBER OR MANAGER

SIGNATURE: _

INHSE10 R (12-98)