

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29304

FILED  
Feb 26, 2007  
Secretary of State

Entity Name: WITHOUT END, INC.

**Current Principal Place of Business:**

C/O YVONNE PETERS  
2827 MAX SMITH  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

2130 RADNOR AVE. W  
COLUMBUS, OH 43224

**New Mailing Address:**

FEI Number: 59-2970765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PETERS, YVONNE D.  
2827 MAX SMITH RD  
LUTZ, FL 33549 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BEYNON, JOE  
Address: 9136 EDGEWOOD DR  
City-St-Zip: GAITHERSBURG, MD 20877

Title: DV ( ) Delete  
Name: PETERS, CARL  
Address: 2827 MAX SMITH RD  
City-St-Zip: LUTZ, FL 33549

Title: DP ( ) Delete  
Name: PETERS, YVONNE  
Address: 2827 MAX SMITH RD  
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete  
Name: OSBORNE, SCOTT  
Address: 227 BROOKHILL DR  
City-St-Zip: GAHANNA, OH 43236

Title: D ( ) Delete  
Name: OSBORNE, DARYSE  
Address: 227 BROOK HILL DR  
City-St-Zip: GAHANNA, OH 43236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YVONNE PETERS

PRES

02/26/2007

Electronic Signature of Signing Officer or Director

Date