

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000064669

1. Entity Name
CCH INVESTMENTS, INC.



Principal Place of Business: 5636 BRIDGETOWN RD.
CINCINNATI, OH 45248

Mailing Address: 5636 BRIDGETOWN RD.
CINCINNATI, OH 45248



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2648543

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAUMAN, STEVEN B
25 NE WALTER MARTIN RD. STE 101
FORT WALTON BEACH, FL 32548

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HETZ, LEWIS T 5636 BRIDGETOWN RD. CINCINNATI, OH 45248
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T THOMAS, STEVEN 2611 ANDERSON FERRY RD CINCINNATI, OH 45238
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV MULVANEY, GREGORY 5054 WESSELMAN WOOD DR CLEVES, OH 45002
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HETZ, CHRISTINE 5636 BRIDGETOWN RD CINCINNATI, OH 45238
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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04/07/05-80010-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

LEWIS T. HETZ, PRESIDENT 3/31/05 (513) 578-4965