

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 90192 006 \*\*\*150.00

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**DOCUMENT # P02000132187**

1. Entity Name

**CASTO-ZENITH CORPORATION**



Principal Place of Business

**209 EAST STATE STREET  
COLUMBUS OH 43215**

Mailing Address

**209 EAST STATE STREET  
COLUMBUS OH 43215**

2. Principal Place of Business

**191 W NATIONWIDE BLVD**

3. Mailing Address

**191 W NATIONWIDE BLVD**

Suite, Apt. #, etc.

**SUITE 200**

Suite, Apt. #, etc.

**SUITE 200**

City & State

**COLUMBUS, OH**

City & State

**COLUMBUS, OH**

Zip

**43215**

Country

Zip

**43215**

Country

4. FEI Number

**65-1172750**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**GREENE, ROBERT F ESQ.  
1301 SIXTH AVENUE W  
SUITE 400  
BRADENTON FL 34205**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P/D  
NAME DON M CASTO III ☐ Delete  
STREET ADDRESS 191 NATIONWIDE BLVD, SUITE 200  
CITY-ST-ZIP COLUMBUS, OH 43215

TITLE V/D  
NAME FRANK S BENSON III ☐ Delete  
STREET ADDRESS 191 W NATIONWIDE BLVD, SUITE 200  
CITY-ST-ZIP COLUMBUS, OH 43215

TITLE V/D  
NAME J. BRETT HUTCHENS ☐ Delete  
STREET ADDRESS 401 N CATTLEMEN RD, SUITE 108  
CITY-ST-ZIP SARASOTA, FL 34232

TITLE T/D  
NAME STEPHEN E DUTTON ☐ Delete  
STREET ADDRESS 191 W NATIONWIDE BLVD, SUITE 200  
CITY-ST-ZIP COLUMBUS, OH 43215

TITLE S/D  
NAME ANTHONY A MARTIN A ☐ Delete  
STREET ADDRESS 191 W NATIONWIDE BLVD, SUITE 200  
CITY-ST-ZIP COLUMBUS, OH 43215

TITLE  
NAME **\*\* SEE ATTACHED \*\*** ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

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 REQUIRED DON M. CASTO, III**

**4/23/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment

90107294

PO2000132187

**2003 UNIFORM BUSINESS REPORT**

**CASIO-ZENTIH CORPORATION**  
**FEIN: 65-1172750**

**10. OFFICERS AND DIRECTORS**

**ADDITION**

D  
Paul G. Lukeman  
5336 Dublin Rd.  
Dublin, Ohio 43017

**ADDITION**

D  
William J. Riat  
191 W. Nationwide Blvd., Suite 200  
Columbus, Ohio 43215