

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sarah B. Matheson  
Secretary of State  
Division of Corporations

APPROVED  
AND  
FILED

50 MAY -1 AM 4:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P03309** (2)

1. Corporation Name:  
**PIZZUTI DEVELOPMENT INC.**

Principal Place of Business: **250 E.BROAD ST. SUITE 900 COLUMBUS OH 43215**  
Mailing Address: **250 E.BROAD ST. SUITE 900 COLUMBUS OH 43215**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation (or Qualification): **09/10/1984**  
3a. Date of Last Report: **05/27/1994**

4. FEI Number: **31-0886981**  
Applied For:  Not Applicable:

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

6. Election Campaign Financing:  **\$5.00 May Be Added to Fees**  
Trust Fund Contribution:

8. This corporation has liability for intangible tax under § 199.032:  
Florida Statutes:  Yes  No

2. Principal Place of Business: 21  
2a. Mailing Address: 26  
State, Apt. # etc.: 22  
City & State: 23  
City: 24, County: 25, State: 29, County: 30

9. Name and Address of Current Registered Agent

**JONES, WILLIAM R  
255 S. ORANGE AVENUE  
SUITE 1350  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name: \_\_\_\_\_  
82 Street Address (P.O. Box Number is Not Acceptable): \_\_\_\_\_  
83 \_\_\_\_\_  
84 City: \_\_\_\_\_  
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation certifies 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.02, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

OFFICER	<b>P</b>
NAME	<b>PIZZUTI, RONALD A.</b>
STREET ADDRESS	<b>250 E.BROAD ST.,STE. 900</b>
CITY, STATE, ZIP	<b>COLUMBUS OH 43215</b>
OFFICER	<b>EVP</b>
NAME	<b>DALEEY RICHARD C.</b>
STREET ADDRESS	<b>250 E.BROAD ST.,STE. 900</b>
CITY, STATE, ZIP	<b>COLUMBUS OH 43215</b>
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (SEE 12)

NAME	STATUS	CHANGE	ADDITION
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information indicated on the enclosed report or supplement is correct and complete and that my signature shall have the same legal effect as if made in the state that I am an officer or director of the corporation or the business or business enterprise covered by this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an officer or director with an address.

SIGNATURE:

*R.C. Daley* Exec. Vice President 5.1.95

614 365-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR