

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State

08-16-2005 90040 039 ***150.00

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DOCUMENT # P04000006391					
1. Entity Name SCIOTO NATIONAL, INC.					
Principal Place of Business 6457 REFLECTIONS DR, STE 200 DUBLIN, OH 43017			Mailing Address 6457 REFLECTIONS DR, STE 200 DUBLIN, OH 43017		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-0615445	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	☒ Delete	TITLE	COO / S	☐ Change ☒ Addition
NAME	SMITH, BRADLEY T		NAME	ROWLAND, WILLIAM L.	
STREET ADDRESS	829 BETHEL RD, #117		STREET ADDRESS	15578 OLIVE GREEN RD.	
CITY - ST - ZIP	COLUMBUS, OH 43214		CITY - ST - ZIP	CENTERBURG, OHIO	
TITLE		☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME			NAME	POHLMAN, JAMES D.	
STREET ADDRESS			STREET ADDRESS	11330 BLOOMLOCK RD	
CITY - ST - ZIP			CITY - ST - ZIP	DELFOS, OHIO 45833	
TITLE		☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME			NAME	NAPIERALA, RICHARD	
STREET ADDRESS			STREET ADDRESS	2239 U.S. 20	
CITY - ST - ZIP			CITY - ST - ZIP	SWANTON, OHIO 43558	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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: <i>William Rowland</i>			8/1/05 614-766-8220		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		