

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000085209

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** MAGOBE ADVISORS CORPORATION

**Current Principal Place of Business:**

15580 KILMARNOCK DRIVE  
FT. MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

432 WALNUT STREET  
STE 500  
CINCINNATI, OH 45202

**New Mailing Address:**

**FEI Number:** 26-0637195      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MEYERS, GEORGE W  
15580 KILMARNOCK DRIVE  
FT. MYERS, FL 33912      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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPT  
**Name:** MEYERS, GEORGE W  
**Address:** 15580 KILMARNOCK DRIVE  
**City-St-Zip:** FT. MYERS, FL 33912

**Title:** CEO  
**Name:** MEYERS, GEORGE W  
**Address:** 15580 KILMARNOCK DRIVE  
**City-St-Zip:** FT. MYERS, FL 33912

**Title:** VP  
**Name:** MEYERS, GREGORY W  
**Address:** 500 TRISTATE BLDG, 432 WALNUT ST  
**City-St-Zip:** CINCINNATI, OH 45202

**Title:** S  
**Name:** REYNOLDS, JANET R  
**Address:** 500 TRISTATE BLDG, 432 WALNUT ST  
**City-St-Zip:** CINCINNATI, OH 45202

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GREGORY W MEYERS

VP

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date