FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 28 1998 8:00am Secretary of State

	MENT # P07137 JONES AND NEBRASKA, IN				
Principal Place of Business Mailing Address				- I INCHEREN IN UNITE HOLDY INDUCE HANN HODE IN	idis Badil aldıl dibil alalı dıdıl tadı
4670 LARWELL DRIVE 4670 LARWELL DRIVE					
COLUMBUS OH 43220 COLUMBUS OH 43220					
				DO NOT WRITE IN	I THIS SPACE
				3. Date Incorporated or Qualified	
9 Principal D	lace of Business	2a. Mailing Address	· ,— · ,— · ·	08/16/1985 4. FEI Number	
21	INCO DI BUSINOSS	26. Mailing Address		31-0814185	Applied For Not Applicable
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>	CO 75 Adulti- and
22		27		5. Certificate of Status Desired	Fee Required
City & State	City & State City & State		······································	6. Election Campaign Financing	\$5.00 May Be
23		28			Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	the current year Intangible
24	25	29	30	Personal Property Tax due June 30	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Regis	stered Agent
	rvin, wesley r.		81 Name		
3727 S.E. OCEAN BLVD.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	,
SUITE 101					
្រ	UART FL 33494		63		
			84 City		85 Zip Code
dd Director	to the manifestor of Continue COT OFOR	and CO7 1500 Florida Otati		poration submits this statement for the pur	FL 65 Zip Code
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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and trife if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	JONES, JAMES THOMAS	DELETE	1.1 TITLE		Change Addition
NAME	4410 CLEARBROOK COURT		1.2 NAME		
STREET ADDRESS	COLUMBUS OH		1.3 STREET ADORESS		
CITY-ST-ZIP TITLE	VD VD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	NEBRASKA, JAMES E.		2.2 NAME		
STREET ADDRESS	1984 SAMADA AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	WORTHINGTON OH		2 4 CITY-ST-ZIP		
TITLE	STD	DELETE	3.1 TIFLE		Change Addition
NAME	LANTZ, PAUL WILLIAM		3.2 NAME		
STREET ADDRESS	615 E. TOWN STREET		3.3 STREET ADDRESS		
CFTY-ST-ZIP	COLUMBUS OH		3.4. CITY-ST-ZIP		
THTLE	VO	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SHELLEY, WILLIAM R.		4. 2 NAME		
STREET ADDRESS	3661 KENNYBROOK LANE		4.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBUS OH		4.4 CITY-ST-ZIP		
TITLE	D MARINE MARKS	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	MARLIN, JAMES J.		5.2 NAME		
STREET ADDRESS	2066 W. HENDERSON RD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBUS OH	TT Seize	5 4 CITY-ST-ZIP		Ohanes Lader-
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		•
CITY-ST-ZIP	portifu that the information supplied with	this films does not evalify	6.4 CITY-ST-ZIP	Section 119 07/3Vi) Florida Statutes Litur	ther certify that the information

4. Thereby 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 annual report or supplemental annual 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 by the receiver or trustee emprevened to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attack on the properties of the corporation by the receiver of the corporation by the receiver of the corporation of the corporation

SIGNATURE

P.W.LANTZ SEL STREA

614-459-5950