

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90018 031 ***150.00

0670020 AV

DOCUMENT # P07137

1. Entity Name

LANTZ, JONES AND NEBRASKA, INC.

Principal Place of Business

Mailing Address

**1166 DUBLIN RD. SUITE 200
 COLUMBUS OH 43215-1038**

**1166 DUBLIN RD. SUITE 200
 COLUMBUS OH 43215-1038**

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

31-0814185

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARVIN, WESLEY R.
 3727 S.E. OCEAN BLVD.
 SUITE 101
 STUART FL 33494**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete

**GIBBS, JOAN L.
 1532 RASPBERRY RUN DR
 COLUMBUS OH**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

**PD
 NEBRASKA, JAMES E.
 1984 SAMADA AVENUE
 WORTHINGTON OH**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

**CD
 LANTZ, PAUL WILLIAM
 615 E. TOWN STREET
 COLUMBUS OH**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

**VDS
 SHELLEY, WILLIAM R.
 3661 KENNYBROOK LANE
 COLUMBUS OH**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

**VD
 BAUMANN, ROBERT
 4112 RED COAT LANE
 COLUMBUS OH**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

**VD
 HAWK, SCOTT L
 3775 WAVERLY PLACE DR
 LEWIS CENTER OH**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joan L. Gibbs **Joan L. Gibbs**

614-481-9800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)