2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 90192 022 ***150.00

P04732G6 AT

DOCUMENT # P09895

1. Entity Name
NATIONWIDE RETIREMENT SOLUTIONS, INC.

Principal Place of Business	Mailing Address
ONE NATIONWIDE PLAZA COLUMBUS OH 43215	PUBLIC EMPLOYEES BENEFIT SERVICES CORP ONE NATIONWIDE PLAZA. 1-13-G1 COLUMBUS OH 43215 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 73-0948330 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DUANE C. MEEK TWO NATIONWIDE PLAZA COLUMBUS OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V OAKLEY, ROBERT A ONE NATIONWIDE PLAZA COLUMBUS OH 43215-2220	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THRESHER, MARK ONE NATIONWIDE PLAZA COLUMBUS OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVPD	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SODEN, GLENN W ONE NATIONWIDE PLAZA COLUMBUS OH 43215-2220	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AVP	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KARAS, RICHARD A ONE NATIONWIDE PLAZA COLUMBUS OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT BERNDT, GARY ONE NATIONWIDE PLAZA COLUMBUS OH 43215-2220	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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: SIGNATURE REQUIRED Gary Berndt 04/22/03 (614) 249-7001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Assistant Treasurer Date Daytime Phone #