

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000009885

FILED  
Feb 17, 2012  
Secretary of State

Entity Name: OHIO RAX JOINT VENTURE INC

**Current Principal Place of Business:**

7 TRILBY BR  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

7 TRILBY BR  
LONGWOOD, FL 32779

**New Mailing Address:**

FEI Number: 59-1971642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TURNAGE, ROBERT  
7 TRILBY BR  
LONGWOOD, FL 32779 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WILKE, WALTER H JR  
Address: 103 MAGNOLIA LAKE DRIVE  
City-St-Zip: LONGWOOD, FL 32779

Title: CFO  
Name: TURNAGE, ROBERT  
Address: 7 TRILBY BRANCH  
City-St-Zip: LONGWOOD, FL 32779

Title: TREA  
Name: SCHWARZMANN, JOANNE  
Address: 7 TRILBY BRANCH  
City-St-Zip: LONGWOOD, FL 32779

Title: VP  
Name: LARSON, DAVID J  
Address: 2344 ALAQUA DR.  
City-St-Zip: LONGWOOD, FL 32779

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: ROBERT TURNAGE

CFO

02/17/2012

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

\_\_\_\_\_  
Date