

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2005 8:00 am
Secretary of State

09-01-2005 90022 036 ***150.00

DOCUMENT # P12725 1. Entity Name PROVESTCO, INC.					
Principal Place of Business 3411 SILVERSIDE ROAD 103 SPRINGER BLDG. WILMINGTON, DE 19810			Mailing Address 1000 CHESTERBROOK BLVD. BERWYN, PA 19312		
2. Principal Place of Business 1000 CHESTERBROOK BLVD		3. Mailing Address ONE NATIONWIDE PLAZA		<div style="font-size: 24pt; font-weight: bold; margin-bottom: 10px;">50064365</div>  <div style="display: flex; justify-content: space-between; font-size: 10pt;"> 07132005 Chg-P CR2E034 (10/03) </div>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. MAIL STOP 1-35-16			
City & State BERWYN, PA		City & State COLUMBUS, OH			
Zip 19312	Country USA	Zip 43215	Country USA	4. FEI Number 51-0257304	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCAHAN, GARY D 1000 CHESTERBROOK BLVD BERWYN, PA 19312	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D R. CLAY THOMPSON ONE NATIONWIDE PLAZA, COLUMBUS, OH 43215		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS BODAYLE, MARYANN 1000 CHESTERBROOK BLVD BERWYN, PA 19312	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP/T BRIAN W. NOCCO ONE NATIONWIDE PLAZA, COLUMBUS, OH 43215		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPF BENSON, JAMES D 1000 CHESTERBROOK BLVD BERWYN, PA 19312	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP/AT/D 		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SV CUOZZO, PETER 1000 CHESTERBROOK BLVD BERWYN, PA 19312	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY SANDRA L. RICH ONE NATIONWIDE PLAZA, COLUMBUS, OH 43215		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETER A. GOLATO ONE NATIONWIDE PLAZA COLUMBUS, OH 43215		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	AVP/AS GLENN W. SODEN ONE NATIONWIDE PLAZA COLUMBUS, OH 43215		
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: GLENN W. SODEN, ASSOC. VICE PRES. & ASST. SECRETARY JULY 27, 2005 614.249.7111					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					