## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 27, 2004 8:00 am Secretary of State DOCUMENT # P17240 02-27-2004 90039 020 \*\*\*150.00 CONVERGYS INFORMATION MANAGEMENT GROUP Principal Place of Business Mailing Address 94022113 600 VINE ST 600 VINE ST PO BOX 2301 PO BOX 2301 CINCINATTI, OH 45202 CINCINATTI, OH 45202 US 115 2. Principal Place of Business 3. Mailing Address 201 E. Fourth Street Suite, Apt. #, etc. Suite, Apt. #, etc 02092004 CB2E034 (10/03) Cha-P Room 102 City & State 4. FEI Number Applied For City & State incinnati 31-1069790 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired П Fee Required -6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Addition ☐ Delete TITLE TITLE ORR, JAMES F NAME NAME STREET ADDRESS STREET ADDRESS **5762 CHESTNUT RIDGE** CITY-ST-ZIP CINCINNATI, OH CITY-ST-ZIP Via President (V) Polend Jeffrey P 201 E Hourth St () Cincinnation OH 45202 VCD Change **Addition** Delete TITLE TITLE DAHMUS, JAMES M NAME NAME 11958 DERBYDAY CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CINCINNATI, OH resident (P) Delete Addition TITLE ☐ Change TITLE NAME MARINO, ROBERT J NAME schwartz Larry S 201 E Fourth of STREET ADDRESS STREET ADDRESS 8554 ST IVES PL CITY-ST-ZIP CINCINNATI, OH 45202 Cincinnati CITY-ST-ZIP Change Treasurer (7) Coleman, William R 201 E Fourth St. Addition Delete TITLE TITLE PELINI, RICHARD A NAME NAME STREET ADDRESS STREET ADDRESS 201 E FOURTH ST CITY-ST-ZIP Cincinnati OH 45202 CITY-ST-ZIP CINCINNATI, OH 45202 ☐ Addition Delete TITLE Assistant treasurer Change GARTNER, MARK J NAME NAME 201 E FOURTH ST RM. 102-1960 STREET ADDRESS STREET ADDRESS CINCINNATI, OH 45202 CITY - ST- ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

FILED

(513) 723-8947

2-10-04