

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32803

1. Corporation Name

STATECO FINANCIAL SERVICES, INC.

Principal Place of Business

**518 EAST BROAD STREET
COLUMBUS OH 43215-3901**

Mailing Address

**518 EAST BROAD STREET
COLUMBUS OH 43215-3901**

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90063 040 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/13/1991

4. FEI Number

31-0676465

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **CD
BAILEY, ROBERT L.
STREET ADDRESS
518 EAST BROAD STREET
CITY-ST-ZIP
COLUMBUS OH**

TITLE ☒ DELETE

NAME **D
HARRIS, URLIN G., JR.
STREET ADDRESS
518 EAST BROAD STREET
CITY-ST-ZIP
COLUMBUS OH**

TITLE ☐ DELETE

NAME **VD
DUEMEY, JAMES E
STREET ADDRESS
518 E BROAD STREET
CITY-ST-ZIP
COLUMBUS OH**

TITLE ☐ DELETE

NAME **SD
LOWTHER, JOHN R.
STREET ADDRESS
518 EAST BROAD STREET
CITY-ST-ZIP
COLUMBUS OH**

TITLE ☐ DELETE

NAME **T
BOWSHIER, TERRENCE L.
STREET ADDRESS
518 EAST BROAD STREET
CITY-ST-ZIP
COLUMBUS OH**

TITLE ☐ DELETE

NAME **P
MOONE, ROBERT H.
STREET ADDRESS
518 E BROAD ST
CITY-ST-ZIP
COLUMBUS OH**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME **CFO
Johnston, Steven J.**

2.3 STREET ADDRESS **518 E Broad St**

2.4 CITY-ST-ZIP **Columbus, OH 43215**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 and that I am duly qualified to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the list of officers and directors of the corporation.

SIGNATURE:

Steven J. Johnston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REC

4/30/99

614-464-50

CR2E034 (1/98)