FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am Secretary of State DOCUMENT # **P32803** STATECO FINANCIAL SERVICES, INC. 04-23-2001 90206 006 ***150.00 Principal Place of Business Mailing Address 518 EAST BROAD STREET 518 EAST BROAD STREET COLUMBUS OH 43215-3901 COLUMBUS OH 43215-3901 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 31-0676465 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE Delete TITLE Change NAME NAME BAILEY, ROBERT L. STREET ADDRESS STREET ADDRESS 518 EAST BROAD STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH TITLE CFO. ☐ Delete TITLE (X) Change ■ Addition V/T/CFO/D NAME NAME JOHNSTON, STEVEN J Johnston, Steven J STREET ADDRESS STREET ADDRESS 518 E. BROAD ST. 518 E Broad St Columbus, OH 4 CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH 43215 TITLE ☐ Delete TITLE ☐ Addition NAME NAME DUEMEY, JAMES E STREET ADDRESS STREET ADDRESS 518 E BROAD STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH TITLE ☐ Delete TITLE ☐ Change Addition NAME LOWTHER, JOHN R. NAME STREET ADDRESS STREET ADDRESS 518 EAST BROAD STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH TITLE . Delete TITLE Change X Addition NAME NAME **BOWSHIER. TERRENCE L.** Powell, Cynthia A STREET ADDRESS STREET ADDRESS 518 EAST BROAD STREET 518 E Broad St CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH Columbus, OH 43215 TITLE ☐ Delete TITLE P/CEO/C/D Change Addition NAME MOONE, ROBERT H. NAME Moone, Robert H STREET ADDRESS 518 E BROAD ST STREET ADDRESS 518 E Broad St 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other tike empowered. CITY-ST-7IP

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

Cynthia A. Powell

4-11-01

614-464-5000

Daytime Phone #