## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED May 26, 2000 8:00 am Secretary of State **DOCUMENT # P35936** 1. Entity Name GEORGE R. HALL, INC. 05-26-2000 90099 042 \*\*\*150.00 Principal Place of Business Mailing Address 33530 PIN OAK PARKWAY 33530 PIN OAK PARKWAY **AVON LAKE OH 44012** AVON LAKE OH 44012-2320 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 34-1377362 Not Applicable 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 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 (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and little if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Tiensurer X Addition TITLE TITLE ☐ Delete Bushman, Ullung E. NAME NAME HALL. GRAHAM STREET ADDRESS 33530 fin Oak faikury Alph Lalle OH 44017 STREET ADDRESS 33530 PIN OAK PARKWAY CITY-ST-ZIP CITY-ST-ZIP **AVON PARK OH** Change ☐ Addition Delete TITLE TITLE NAME BUSHMAN, DENNIS E. NAME STREET ADDRESS STREET ADDRESS 33530 PIN OAK PARKWAY CITY-ST-ZIP CITY-ST-ZIP **AVON LAKE OH** Delete Change ☐ Addition TITLE AS TITLE PORTMANN, RICHARD W. NAME NAME STREET ADDRESS 33530 PIN OAK PARKWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVON LAKE OH Change ☐ Addition M Delete TITLE TITLE TAYLOR, HOMER E MAME NAME STREET ADDRESS STREET ADDRESS 33510 PINE OAK PARKWAY CITY-ST-ZIP CITY-ST-ZIP **AVON LAKE OH 44012** Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change | ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 like empowered.

DEMNIS E. BUSH MAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

440-433-4100

Daytime Phone #