2001 UNIFORM BUSINESS REPORT (UBR)

May 21, 2001 8:00 am Secretary of State DOCUMENT # P35936 1. Entity Name 05-21-2001 90355 005 ***150 00 GEORGE R HALL INC Principal Place of Business Mailing Address 33530 PIN OAK PARKWAY 33530 PIN OAK PARKWAY AVON LAKE OH 44012 AVON LAKE OH 44012 768682 USA 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 34-1377362 Not Applicable Zin Country Zin 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 SYSTEMS Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND ROAD PLANTATION FL 35324 City Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE IN WATER IS 11 SO 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Check Payable to Department of SI 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Delete ☐ Addition TITLE ☐ Chance VICE PRESIDENT PRESIDENT NAME MOORE, H. WILLIAM HALL, GRAMHAM STREET ADDRESS STREET ADDRESS SAME AS ABOVE SAME AS ABOVE CATY - ST - ZNP CITY - ST- 71P ☐ Change TITLE Deleta TITLE ☐ Addition SECRETARY NAME NAME BUSHMAN, DENNIS E STREET ADDRESS STREET ADDRESS SAME AS ABOVE CITY-ST-ZW CITY-ST-ZIP TITLE TITL F ☐ Delete Change ☐ Addition NUE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition 444 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

DENNI'S E. BUSHMAN

CR2E034 (11/00)

FILED

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR