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

**PROFIT** CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

l	JAL REPORT 1998	Secretary DiVISION OF CO		Secretary	of State
	MENT # P9300 SOFT, INC.	00062577 (0)		)	RIJIA YARAN ANIJI JAAN 1887 JERY
Principal Place	a of Rusinass	Mailing Address	<u></u>		
Principal Place of Business Mailing Address  1001 VISION DRIVE P.O. BOX 635				}	
VANWENT OH 45891 VAN WERT OH 45891		VAN WERT OH 45891		OO NOT WRITE WITH	10.004.05
US		US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				09/08/1993	
hand the second		2a. Mailing Address		4. FEI Number	Applied For
[21]		26 Codo Ant # ata		34-1754079	Not Applicable
Suite, Apt. #, etc.         Suite, Apt. #, etc.           22         27		<u> </u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	City & State City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
25 29 3 9. Name and Address of Current Registered Agent			30	Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
~ 7		IOIII NOGISTAIDO NGOIII	81 Name	10. Hame and Address of New Hogisters	A Agent
C I CONTONATION STSTEM					
82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324					
'	MINION FE 000ET		63		
			B4 City		lee   7:o Codo
			City	F	L 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the St Im familiar with, and accept the ob	0502 and 607 1508, Florida Statute ale of Florida. Such change was au digations of, Section 607.0505, Flor	s, the above-named cor uthorized by the corpora rida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE			<u></u>		
12.	Signature, typed or profind name of registered	Lagent and lifte if apolicable (NOTE AND DIRECTORS	Registered Agent signature requ	uired when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	CEO	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	DAFOE, KENNETH F		1.2 NAME		•
STREET ADDRESS	10621 GREENVILLE ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	VAN WERT OH		1.4 CITY-ST-ZIP		
TITLE	P	DELETE	21 TITLE		☐ Change ☐ Addition
NAME	DAFOE, DEREK D		2.2 NAME		
STREET ADDRESS	1056 LINDEN DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	VAN WERT OH	DELFTE	2. 4 CITY - ST - ZIP 3.1 FITLE		Change Addition
NAME	DAFOE, HEATHER M	_ otti	3.2 NAME		— charge — hadded
STREET ADDRESS	10821 GREENVILLE ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP	VAN WERT OH		3.4. CITY-SY-ZIP		_
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	MARSEE, FRED		4. 2 NAME		
STREET ADDRESS	5720 PAYNE ROAD		4.3 STREET ADDRESS		
CITY-ST-ZIP	CONVOY OH	DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE NAME	D Griffen, Dana	ריז הנרנוני	5.1 TITLE 5.2 NAME		Change C Moulion

64CiTy-ST-ZIP VAN WERT, OH 45891

or does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information short is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an acceptate the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the exemptions. CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling indicated on this annual report or supplier mental annual reformation or the factor of director of the corporation or the receiver or the state Block 12 or Block 12 if changed, or on a manual mental with

61 TITLE

62 NAME

■ DELETE

**SIGNATURE** 

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

195 KENWICK DR

VAN WERT OH

DEREK D. DAFOE, PRESIDENT

5.3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY-ST-ZIP

4398

MICHAEL MCKENZIE

1040 JENNINGS ROAD

Change

**X** Addition

**FILED** 

Apr 09 1998 8:00am