

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000089469 (8)

1. Corporation Name

MAS HOLDING CORP.



Principal Place of Business

1105 SCHROCK ROAD
SUITE 206
COLUMBUS OH 43229-1174

Mailing Address

1105 SCHROCK ROAD
SUITE 206
COLUMBUS OH 43229-1174

3. Date Incorporated or Qualified
12/09/1994

3a. Date of Last Report
09/28/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

WINTERS, ELISE K P.A.
600 CLEVELAND ST., SUITE 940
CLEARWATER FL 34615

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

31-1423563

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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 officer or director (typed or printed name)

Signature (typed or printed name) of registered agent (typed or printed name)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME CARSWELL, JAMES G
STREET ADDRESS 1105 SCHROCK ROAD STE 206
CITY-ST-ZIP COLUMBUS OH 34229-1174

TITLE DV ☐ DELETE

NAME MCVAY, TOM D
STREET ADDRESS 1105 SCHROCK ROAD, SUITE 206
CITY-ST-ZIP COLUMBUS OH 43229-1174

TITLE DS ☐ DELETE

NAME DEAN, DENNIS E
STREET ADDRESS 600 CLEVELAND ST. STE 970
CITY-ST-ZIP CLEARWATER FL 34615

TITLE DT ☐ DELETE

NAME WHALEY, RICHARD T
STREET ADDRESS 1105 SCHROCK ROAD, SUITE 206
CITY-ST-ZIP COLUMBUS OH 43229-1174

TITLE AS ☐ DELETE

NAME WINTERS, ELISE K
STREET ADDRESS 600 CLEVELAND ST. STE 940
CITY-ST-ZIP CLEARWATER FL 34615

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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-06/06/96--01053-016
***225.00

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James H. Carswell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-30-96

614 431 0722

CR2E034 (12/95)