

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000053350

FILED
Apr 23, 2004
Secretary of State

Entity Name: ADOBE GILA'S OF OHIO, INC.

Current Principal Place of Business:

3978 REGENT ST.
P-202
COLUMBUS, OH 43219

New Principal Place of Business:

3978 EASTON STATION
P-202
COLUMBUS, OH 43219

Current Mailing Address:

4411 CLEVELAND AVENUE
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 58-2470057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMEONE, RICHARD J
4411 CLEVELAND
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: LAGESCHULTE, DAVID L
Address: 4411 CLEVELAND AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: DP () Delete
Name: BRAUNER, TERRY
Address: 4411 CLEVELAND AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: DST () Delete
Name: LYNCH, PAUL
Address: 4411 CLEVELAND AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: VP () Delete
Name: LYNCH, PAUL W.,
Address: 4411 CLEVELAND AVE
City-St-Zip: FT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL LYNCH

VP

04/23/2004

Electronic Signature of Signing Officer or Director

Date