

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 10, 2005 8:00 am
Secretary of State

08-10-2005 90016 023 ***550.00

DOCUMENT # V67762

1. Entity Name
FERNOSOUTH, INC.



Principal Place of Business
8665 BAY COLONY DR
2003
NAPLES, FL 34108 US

Mailing Address
8665 BAY COLONY DR
SUITE 2003
NAPLES, FL 34108 US

50060828



07122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0363265	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Paul Riordan*

8/3/05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BOURGRAF, ELROY E 8000 PEREGRINE LANE CINCINNATI, OH 45243
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BOURGRAF, JOE 70 WEIL WAY WILMINGTON, OH 45177
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROBERT FISSEL 70 WEIL WAY WILMINGTON, OH 45177
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PAUL RIORDAN 70 WEIL WAY WILMINGTON, OH 45177
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Paul Riordan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/05 *treasurer*

Date Daytime Phone #

937-382-1451