

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000005949

Entity Name: BLANCHARD TERMINAL COMPANY LLC

Current Principal Place of Business:

539 S. MAIN STREET
FINDLAY, OH 45840

Current Mailing Address:

539 S. MAIN STREET
FINDLAY, OH 45840

FEI Number: 30-0748502

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Authorized Person(s) Detail :

Title PRESIDENT
Name AYDT, T J
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title VP
Name LEVI, B J
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title VP
Name PIERSON, C O
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title SECRETARY
Name PFLEIDERER, S T
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASST. SECRETARY
Name BUSEY, N M
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASST. SECRETARY
Name BENSON, M R
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASST. SECRETARY
Name WINEBAR, C S
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title TREASURER
Name GILGEN, P
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Continues on page 2

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: C. S. WINEBAR

ASST. SECRETARY

04/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title ASST. TREASURER
Name WILSON, L D
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title CONTROLLER
Name GRUBB, J R
Address 539 S. MAIN STREET
City-State-Zip: FINDLAY OH 45840