

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000001276

Entity Name: MOODY-NOLAN, INC.

**Current Principal Place of Business:**

300 SPRUCE STREET  
SUITE 300  
COLUMBUS, OH 43215

**FILED**  
**Mar 06, 2024**  
**Secretary of State**  
**1231388925CC**

**Current Mailing Address:**

300 SPRUCE STREET  
SUITE 300  
COLUMBUS, OH 43215 US

**FEI Number: 31-1256984**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
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

**Officer/Director Detail :**

Title COO  
Name SCHAFFER, ALLEN  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR  
Name TIBBS, BRIAN  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR  
Name GOODMAN, EILEEN  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR  
Name MOODY, ELAINE  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title PRESIDENT/CEO  
Name MOODY, JONATHAN  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title TREASURER/CFO  
Name BODIEN, MARK  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title TREASURER/CFO  
Name CROCKETT, SHAYNE  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

Title SECRETARY  
Name RANSIER, KATHY  
Address 300 SPRUCE STREET  
SUITE 300  
City-State-Zip: COLUMBUS OH 43215

**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 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 all other like empowered.*

SIGNATURE: ALLEN SCHAFFER

COO

03/06/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           CHAIRMAN OF THE BOARD  
Name           MOODY, CURT  
Address        300 SPRUCE STREET  
                  SUITE 300  
City-State-Zip: COLUMBUS OH 43215