

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000004088

Entity Name: SPEEDY PREPAID SERVICES INC.**Current Principal Place of Business:**500 SPEEDWAY DRIVE
ENON, OH 45323**Current Mailing Address:**500 SPEEDWAY DRIVE
ENON, OH 45323 US**FEI Number:** 45-3662042**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

Officer/Director Detail :

Title SECRETARY, VP
Name BENSON, M R
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASST. SECRETARY
Name LINHARDT, R
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASST. SECRETARY
Name SUCHECK, S E
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASSISTANT TREASURER
Name RANDECKER, B E
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

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

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

Title TREASURER
Name NIESE, K S
Address 500 SPEEDWAY DRIVE
City-State-Zip: ENON OH 45323

Title ASSISTANT TREASURER
Name KACHUR, K M
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

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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: S. E. SUCHECK**ASSISTANT SECRETARY 04/13/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title CONTROLLER
Name QUAID, J J
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title DIRECTOR
Name KACZYNSKI, T.
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title VP
Name GAGLE, S
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title ASSISTANT SECRETARY
Name HUISMAN, B
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title DIRECTOR
Name BENSON, M R
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840

Title DIRECTOR
Name LINHARDT, D R
Address 539 SOUTH MAIN STREET
City-State-Zip: FINDLAY OH 45840