## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 21, 2000 8:00 am Secretary of State DOCUMENT # F98000000995 1. Entity Name BRISBEN DEVELOPMENT, INC. 03-21-2000 90083 004 \*\*\*150.00 Mailing Address Principal Place of Business 7800 EAST KEMPER ROAD 7800 EAST KEMPER ROAD CINCINNATI OH 45249 **CINCINNATI OH 45249-1614** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 31-1184543 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ATKINSON, WILSON Street Address (P.O. Box Number is Not Acceptable) 1946 TYLER STREET HOLLYWOOD FL 33020 Zip Code FI 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 $\Box$ Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PTSD T/S/C/D X Change ☐ Addition ☐ Defete TITLE TITLE BRISBEN, WILLIAM O BRISBEN, WILLIAM O NAME STREET ADDRESS 25 NORTH BEACH ROAD STREET ADDRESS 7800 EAST KEMPER ROAD CITY-ST-ZIP JUPITER ISLAND FL 33475 CITY-\$T-ZIP CINCINNATI, OH 45249 X Change Addition | Delete TITLE TITLE SCHULER, ROBERT E NAME SCHULER, ROBERT E NAME 7800 EAST KEMPER ROAD STREET ADDRESS STREET ADDRESS 7800 EAST KEMPER ROAD CITY-ST-ZIP CINCINNATI OH 45249 CITY-ST-ZIP CINCINNATI, OH 45249 Change TITLE ▼ Addition TITLE ☐ Delete NAME NAME GAMBINI, JOHN L STREET ADDRESS STREET ADDRESS 7800 EAST KEMPER ROAD CITY-ST-ZIP CITY-ST-ZIF CINCINNATI, OH 45249 TITLE ☐ Change **★** Addition TITLE ☐ Delete NAME NAME PAXTON, DON W STREET ADDRESS STREET ADDRESS 7800 EAST KEMPER ROAD CITY-ST-ZIP CITY-ST-ZIP CINCINNATI, OH 45249 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7!P CITY-ST-7IF ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with a doress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(513) 489-1990

Daytime Phone #

ChzeU34 (9/99)