



Toll Free: 877.767.3453
Central Ohio: 614.466.3910
OhioSoS.gov
business@OhioSoS.gov
File online or for more information: OhioBusinessCentral.gov

Mail this form to one of the following:
Regular Filing (non expedite)
P.O. Box 788
Columbus, OH 43216
Expedite Filing (Two business day processing time. Requires an additional \$100.00)
P.O. Box 1390
Columbus, OH 43216

For screen readers, follow instructions located at this path.

Statement of Continued Existence
Filing Fee: \$25
Form Must Be Typed

CHECK ONLY ONE (1) Box

(1) [X] Statement of Continued Existence (163-CCE)
(Domestic Nonprofit Corporation)

(2) [] Verification of Foreign Nonprofit (173-FCE)
(Foreign Nonprofit Corporation)

By submitting this form the corporation is verifying with the secretary of state's office that it is still actively engaged in exercising its corporate privileges

Name of Corporation: VILLAGE AT ALUM CREEK HOMEOWNERS ASSOCIATION, INC.
Charter or License Number: 1081978

Complete the information in this section if box (1) is checked

Location of Principal Office: LEWIS CENTER, DELAWARE
Date of Incorporation: 6/3/1999

Complete the information in this section if box (2) is checked

Date of Qualification in Ohio:
Jurisdiction of Formation:
Address of Principal Office:
City, State, Zip Code

All Corporations must complete this section

Current Statutory Agent's Name and Address

K&C SERVICE CORPORATION

Name of Agent

8101 NORTH HIGH STREET, SUITE 370

Mailing Address

COLUMBUS

City

Ohio

State

43235

Zip Code

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

The statement must be signed by a director, officer, or three members in good standing.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Joseph W. Leone HOA President
Signature

By (if applicable)

JOSEPH W. LEONE

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name