

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2011</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☒ a multiple-employer plan; or ☐ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☒ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☐ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>NORTHERN OHIO PROFIT SHARING PLAN AND TRUST</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>333</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>12/11/1959</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>333</u>	1c Effective date of plan <u>12/11/1959</u>	
1b Three-digit plan number (PN) ▶	<u>333</u>				
1c Effective date of plan <u>12/11/1959</u>					
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>LAKE ERIE CONSTRUCTION</u> <u>P. O. BOX 777</u> <u>NORWALK, OH 44857</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>34-1262474</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>419-668-3302</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>237990</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>34-1262474</u>	2c Sponsor's telephone number <u>419-668-3302</u>	2d Business code (see instructions) <u>237990</u>	
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2c Sponsor's telephone number <u>419-668-3302</u>					
2d Business code (see instructions) <u>237990</u>					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	03/21/2014	JAYSEN MERCER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") LAKE ERIE CONSTRUCTION P. O. BOX 777 NORWALK, OH 44857	3b Administrator's EIN 34-1262474 3c Administrator's telephone number 419-668-3302
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	175
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	130
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	31
d Subtotal. Add lines 6a , 6b , and 6c	6d	161
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	161
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	159
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information)
- (4) ☒ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2011
		This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011	
A Name of plan NORTHERN OHIO PROFIT SHARING PLAN AND TRUST	B Three-digit plan number (PN) ▶ 333
C Plan sponsor's name as shown on line 2a of Form 5500 LAKE ERIE CONSTRUCTION	D Employer Identification Number (EIN) 34-1262474

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FIRST EAGLE OVERSEAS FUND

1345 AVENUE OF THE AMERICAS
NEW YORK, NY 10105

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	12896	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

FPA CRESCENT FUND

803 WEST MICHIGAN ST.
MILWAUKEE, WI 53233

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	6967	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

JANUS TRITON FUND

DETROIT ST.
DENVER, CO 80206-4805

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	14601	Yes ☒ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

PERMANENT PORTFOLIO FUND

600 MONTGOMERY ST.
SAN FRANCISCO, CA 94111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	20053	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

PIMCO FUNDS

840 NEWPORT CENTER DR.
NEWPORT BEACH, CA 92660

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	5850	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

FAIRHOLME FUNDS

4400 BISCAYNE BLVD.
MIAMI, FL 33137

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	8593	Yes ☒ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

DOUBLELINE TOTAL RETURN BOND FUND

333 SOUTH GRAND AVE., SUITE 1800
LOS ANGELES, CA 90071

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	6936	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

PIMCO EMERGING MARKETS LOCAL BOND

840 NEWPORT CENTER DRIVE
NEWPORT BEACH, CA 92660

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	6570	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

TCW EMERGING MARKETS INCOME FUND

865 SOUTH FIGUEROA, SUITE 1800
LOS ANGELES, CA 90017

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
52	MUTUAL FUND MANAGER	0	Yes ☒ No ☐	Yes ☐ No ☒	5697	Yes ☒ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2011 This Form is Open to Public Inspection
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>		
A Name of plan <u>NORTHERN OHIO PROFIT SHARING PLAN AND TRUST</u>	B Three-digit plan number (PN) ►	<u>333</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LAKE ERIE CONSTRUCTION</u>	D Employer Identification Number (EIN) <u>34-1262474</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.				
	Assets			
a	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)		
	(2) Participant contributions	1b(2)		
	(3) Other	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	16014	2462364
	(2) U.S. Government securities	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)	4185940	9290844
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts	1c(9)		
	(10) Value of interest in pooled separate accounts	1c(10)		
	(11) Value of interest in master trust investment accounts	1c(11)		
	(12) Value of interest in 103-12 investment entities	1c(12)		
	(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	18435045	11072606
	(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
	(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	22636999	22825814

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		4073
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	4073

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	22636999	22821741
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	1127598	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1127598
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	11222	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		11222
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	617571	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		617571
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-560466
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1195925

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1006588	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		1006588
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	4595	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		4595
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1011183

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		184742
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☐ Yes ☒ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: PAYNE, NICKLES & CO.

(2) EIN: 34-1664586

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

- 4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?

If "Yes," enter the amount of any plan assets that reverted to the employer this year..... ☐ Yes ☒ No Amount:

- 5b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)

5b(2) EIN(s)	5b(3) PN(s)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection.
---	--	--

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan <u>NORTHERN OHIO PROFIT SHARING PLAN AND TRUST</u>	B Three-digit plan number (PN) ▶ <u>333</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LAKE ERIE CONSTRUCTION</u>	D Employer Identification Number (EIN) <u>34-1262474</u>

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>34-1829910</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
----------------	--

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

- 19** If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

**NORTHERN OHIO
PROFIT SHARING PLAN**

**FINANCIAL STATEMENTS
WITH SUPPLEMENTARY INFORMATION**

YEARS ENDED DECEMBER 31, 2011 AND 2010



TABLE OF CONTENTS

	<u>Page</u>
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	2
Statements of Changes in Net Assets Available for Benefits	3
Notes to Financial Statements	4
SUPPLEMENTARY INFORMATION	
Financial Schedules	
Schedule of Assets Held for Investment Purposes at End of Year - 2011	12
Schedule of Reportable Transactions - 2011	14





Payne Nickles & Company

Certified Public Accountants and Business Advisors

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
of **Northern Ohio Profit Sharing Plan**
Norwalk, Ohio

We have audited the accompanying statements of net assets available for benefits of the **Northern Ohio Profit Sharing Plan** as of December 31, 2011 and 2010, and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the **Northern Ohio Profit Sharing Plan** as of December 31, 2011 and 2010, and the changes in its net assets available for benefits for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedules of assets held for investment purposes at end of year and reportable transactions, together referred to as "supplemental information", are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. This supplemental information is the responsibility of the Plan's management. The supplemental information has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Payne, Nickles & Company

Norwalk, Ohio
October 10, 2012

**NORTHERN OHIO
PROFIT SHARING PLAN**

**Statements of Net Assets Available for Benefits
December 31**

Assets	<u>2011</u>	<u>2010</u>
Investments:		
Mutual funds, at fair value	\$11,072,606	\$18,435,045
Common stocks, at fair value	<u>9,290,844</u>	<u>4,185,940</u>
Total investments	20,363,450	22,620,985
Receivables:		
Employer contributions	1,358,623	1,127,598
Cash, interest-bearing	<u>2,462,364</u>	<u>16,014</u>
Total assets	24,184,437	23,764,597
Withheld taxes payable	<u>(4,073)</u>	<u>-</u>
Net assets available for benefits	<u>\$24,180,364</u>	<u>\$23,764,597</u>

The accompanying notes are an integral part of these financial statements.



**NORTHERN OHIO
PROFIT SHARING PLAN**

**Statements of Changes in Net Assets Available for Benefits
For the years ended December 31**

	<u>2011</u>	<u>2010</u>
Additions:		
Additions to net assets attributed to:		
Investment income:		
Interest	\$ 11,222	\$ 687
Dividends	<u>617,571</u>	<u>408,691</u>
	628,793	409,378
Net appreciation (depreciation) in fair market value of investments	(560,466)	107,144
Employer contributions	<u>1,358,623</u>	<u>1,149,192</u>
Total additions	1,426,950	1,665,714
Deductions:		
Deductions from net assets attributed to:		
Benefits paid to participants	1,006,588	5,180,433
Administrative expenses	<u>4,595</u>	<u>913</u>
Total deductions	<u>1,011,183</u>	<u>5,181,346</u>
Net increase (decrease) in net assets available for benefits	415,767	(3,515,632)
Net assets available for benefits beginning of year	<u>23,764,597</u>	<u>27,280,229</u>
Net assets available for benefits end of year	<u>\$24,180,364</u>	<u>\$23,764,597</u>

The accompanying notes are an integral
part of these financial statements.



NORTHERN OHIO PROFIT SHARING PLAN

Notes to Financial Statements For the years ended December 31, 2011 and 2010

1. Description of the plan

The following description of the Northern Ohio Profit Sharing Plan (Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

Effective March 1, 1993, the Lake Erie Construction Company Profit Sharing Plan and Trust was renamed the Northern Ohio Profit Sharing Plan and Trust. At that same date the Plan was amended and restated in its entirety to become a multiple employer plan and to change its year end to December 31. The Plan was subsequently amended and restated, effective October 15, 2008, and renamed the Northern Ohio Profit Sharing Plan. The restated plan allows for non-elective contributions to three separate groups of participants in such proportion that each participant's compensation bears to the total compensation of all participants within each group or in equal amounts or percentages of compensation for that group. At December 31, 2007, the following companies are adopting employers of the Plan (the Companies): Lake Erie Construction Company, Maple City Development Company, and Firelands Supply Company.

On November 30, 2011, the Northern Ohio Profit Sharing Plan was amended for Plan years beginning after December 31, 2010 (2011 Plan year) to include American Highway Safety, LLC as an adopting employer of the Plan. All other terms and provisions of the Plan remained the same.

The Plan is a defined contribution plan covering all full-time employees of the Companies who have one year of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

The Plan provides for annual contributions in such amounts as the Companies shall determine, but not to exceed limitations imposed by the Internal Revenue Code, and allows for participant contributions in the form of rollover amounts from other qualified plans. All contributions to the Plan are nonparticipant-directed. The Plan provides for vesting with the participants at the rate of 20% after two years of service, increasing 20% per year thereafter.



1. Description of the plan - continued

Participant accounts

Each participant's account is credited with an allocation of (a) the Companies' contributions, (b) Plan earnings, and (c) forfeitures of terminated participants' nonvested accounts. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Forfeited accounts

Forfeitures of terminated participants' nonvested accounts amounted to \$16,801 and \$0 for 2011 and 2010, respectively.

Payment of benefits

On termination of service, a participant may elect to receive either a lump-sum amount equal to the vested balance of his or her account, or annual installments over a period of life expectancy, as set forth in the Plan. Any participant who has completed at least six years of service with the Company may withdraw all or any portion of his vested interest in his account, within the limitations and conditions set forth in the Plan.

2. Summary of significant accounting policies

Basis of accounting

Accounting records are maintained by the Trustee on the cash basis. The financial statements herein include all material adjustments necessary to place the financial statements on the accrual basis of accounting. The Annual Return/Report of Employee Benefit Plan is filed on the cash basis.

Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that effect certain reported amounts and disclosures. Accordingly, actual results could differ from these estimates.

Financial instruments - concentration of credit risk

The Plan places its temporary cash investments with financial institutions in amounts which may exceed the federally insured deposit limits.



2. Summary of significant accounting policies - continued

Investment valuation and income recognition

Investment transactions are recorded by the Trustee on the trade-date basis. Investments owned are reflected in the statement of net assets available for plan benefits at market value based on quoted market prices. See financial schedules for a list of investments held at December 31, 2011, and any reportable transactions required to be disclosed.

Changes in unrealized appreciation (depreciation) of investments are reflected currently in net appreciation (depreciation) in fair market value of investments in the accompanying statements of changes in net assets available for benefits. Realized gains and losses are determined based on the original cost of the assets and are also included in net appreciation (depreciation) in fair market value of investments in the accompanying statements of changes in net assets available for benefits.

Administrative expenses

Certain administrative functions are performed by officers or employees of the Companies. No such officer or employee receives compensation from the Plan. Certain administrative expenses are paid directly by the Companies.

Payment of benefits

Benefits are recorded when paid.

Subsequent events

Management has evaluated subsequent events through October 10, 2012 the date the financial statements were available to be issued.

3. Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that a change could occur in the near term that could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits and the statement of changes in net assets available for benefits.

4. Tax determination

The Plan obtained its latest determination letter on May 4, 2009, in which the Internal Revenue Service stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

5. Plan termination

Although it has not expressed any intent to do so, the Companies have the right under the Plan to discontinue their contributions at any time or to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100 percent vested in their accounts and each participant and beneficiary will be paid the amount of his or her account balance in the Plan in a lump sum.

6. Contributions

For the years ended December 31, 2011 and 2010, employer contributions include contributions of \$136,383 and \$210,007, respectively, made by the participating employers of the Lake Erie Construction Company, Maple City Development Company, and Firelands Supply Company pension plan.

7. Fair value measurements

FASB ASC 820 establishes that fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (exit price) and establishes a fair value hierarchy based upon the inputs used to measure fair value. The three levels of the fair value hierarchy defined by FASB ASC 820 are described below:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices in active markets that are accessible at the measurement date for identical unrestricted assets or liabilities (for example, exchange quoted prices).



7. Fair value measurements - continued

Level 2 - Inputs to the valuation methodology are observable inputs, other than Level 1 prices, such as quoted prices for similar assets or liabilities in active markets, quoted prices in markets that are not sufficiently active to qualify as Level 1, other observable inputs, or inputs that can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 - Inputs to the valuation methodology are significant to the fair value measurement and unobservable (for example, supported by little or no market activity).

As required by FASB ASC 820, financial assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The Plan's assessment of the significance of a particular input to the fair value measurement requires judgment and may affect the valuation of the fair value of assets and liabilities and their placement within the fair value hierarchy levels. The Plan's investments accounted for at fair value as of December 31, 2011 are summarized below:

	<u>Level 1</u>	<u>Total Fair Value</u>
Mutual funds	\$11,072,606	\$11,072,606
Common stocks	<u>9,290,844</u>	<u>9,290,844</u>
	<u>\$20,363,450</u>	<u>\$20,363,450</u>

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2011.

Mutual funds and common stocks are valued at the net asset value of shares held by the Plan at year end.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement as of the reporting date.

Gains and losses (realized and unrealized) are included in net appreciation (depreciation) in fair market value of investments in the statement of changes in net assets available for benefits for the years ended December 31, 2011 and 2010.



8. Schedule of investments

The following table presents investments, all of which are nonparticipant-directed, which represent five percent or more of the Plan's net assets available for benefits at the beginning of their respective year ends.

<u>Issuer</u>	<u>Description</u>	<u>No. of Units</u>	Fair Value December 31	
			<u>2011</u>	<u>2010</u>
Mutual Funds:				
First Eagle SoGen Funds	First Eagle Overseas Cl I	95,022	-	\$2,183,611
ING Funds	Value Choice Fd Cl 1	204,408	-	3,615,984
Janus Funds	Triton Fund T	227,909	-	3,742,263
Permanent Portfolio Fund	Permanent Fund	48,040	2,214,154	-
		48,726	-	2,232,116
Pimco Funds	Stockplus Sh Strategic Fd	1,136,742	-	4,967,564
Stocks:				
I Shares Barclays	1-3 Yr. Treasury Bond	22,000	-	1,847,560
Cash, interest-bearing:				
TD Ameritrade	Cash & Money Market	2,462,364	2,462,364	-

9. Reconciliation to Form 5500

As discussed in Note 2, the Plan's financial statements are presented on the accrual basis of accounting and the Annual Return/Report of Employee Benefit Plan (Form 5500) is prepared and filed on the cash basis of accounting. The following schedule reconciles the differences between those two methods as of and for the year ended December 31, 2011 and the differences in classifications of investment income, gains and losses for the year ended December 31, 2011.

	Per financial statements	Adjustments to cash basis	Reclassifi- cations to Form 5500 Presentation	Per Form 5500
Investments:				
Mutual funds and common stocks	\$20,363,450	\$ -	\$ -	\$20,363,450
Receivables:				
Employer contributions	1,358,623	(1,358,623)	-	-
Cash	<u>2,462,364</u>	<u>-</u>	<u>-</u>	<u>2,462,364</u>
	24,184,437	(1,358,623)	-	22,825,814
Withheld taxes payable	<u>(4,073)</u>	<u>-</u>	<u>-</u>	<u>(4,073)</u>
Net assets available for benefits	<u>\$24,180,364</u>	<u>\$ (1,358,623)</u>	<u>\$ -</u>	<u>\$22,821,741</u>
Additions to net assets:				
Investment income:				
Interest	\$ 11,222	\$ -	\$ -	\$ 11,222
Dividends	617,571	-	(617,571)	-
Net appreciation	(560,466)	-	560,466	-
Employer contributions	1,358,623	(231,025)	-	1,127,598
Net investment gain	-	-	57,105	57,105
Deductions from net assets:				
Benefits paid	(1,006,588)	-	-	(1,006,588)
Administrative expenses	<u>(4,595)</u>	<u>-</u>	<u>-</u>	<u>(4,595)</u>
Net increase (decrease) in net assets available for benefits	<u>\$ 415,767</u>	<u>\$ (231,025)</u>	<u>\$ -</u>	<u>\$ 184,742</u>

SUPPLEMENTARY INFORMATION

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST
Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Plan # 333
Employer ID # 34-1262474

Schedule of Assets Held for Investment Purposes At End of Year - Line 4i

(a)	(b) Identity of issue	(c) Description of investment	(d) Cost	(e) Current value
	TD AMERITRADE MONEY MARKET	2,462,364 UNITS	2,462,364	2,462,364
	APPLIED MATERIALS, INC. COMMON	39,000 SHARES	439,100	417,690
	BECTON DICKINSON & CO COMMON	4,500 SHARES	333,154	336,240
	BERKSHIRE HATHAWAY, INC. CLASS B	3,290 SHARES	264,055	251,027
	BEST BUY CO INC. COMMON	29,000 SHARES	666,860	677,730
	BMC SOFTWARE INC. COMMON	6,700 SHARES	221,641	219,626
	CA INCORPORATED COMMON	9,300 SHARES	190,283	187,999
	CISCO SYSTEMS INC COMMON	18,200 SHARES	329,655	329,056
	CORELOGIC INC COMMON	44,400 SHARES	598,052	574,092
	EXELON CORP COMMON	9,400 SHARES	414,187	407,678
	FLUOR CORP COMMON	6,800 SHARES	329,532	341,700
	FOREST LABS INC COMMON	10,600 SHARES	310,902	320,756
	GENERAL DYNAMICS CORP COMMON	3,650 SHARES	231,305	242,396
	GILEAD SCIENCES INC COMMON	9,300 SHARES	368,470	380,649
	HEWLETT PACKARD CO COMMON	25,600 SHARES	755,280	659,456
	JP MORGAN CHASE & CO COMMON	9,900 UNITS	296,779	329,175
	MARKET VECTORS GOLD MINERS ETF	7,000 UNITS	368,338	360,010
	MEDTRONIC INC COMMON	5,850 SHARES	218,679	223,762
	MICROSOFT CORP COMMON	8,500 SHARES	219,898	220,660
	MOLSON COORS BREWING CLASS B	6,000 SHARES	234,379	261,240
	MURPHY OIL CORP COMMON	4,300 SHARES	238,654	239,682
	POSCO ADR	5,830 UNITS	566,793	478,643
	PROCTER GAMBLE CO COMMON	3,600 SHARES	227,921	240,156
	ROCHE HOLDINGS ADRS LTD COMMON	8,700 SHARES	358,186	370,185



Plan # 333
Employer ID # 34-1262474

[illegible]

**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	CASH/MONEY MARKET AGGREGATE WITHDRAWALS AGGREGATE DEPOSITS	N/A N/A	138,468,739 N/A	N/A N/A	N/A N/A	138,468,739 2,446,350	138,468,739 N/A	0 N/A
TD AMERI- TRADE	AMER CENTY MUT FDS INC. TWN AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,400,000	1,433,315 N/A	N/A N/A	N/A N/A	1,400,000 N/A	1,433,315 1,400,000	33,315 N/A
TD AMERI- TRADE	ANNALY CAPITAL MGMT INC AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,716,364	1,668,949 N/A	N/A N/A	N/A N/A	1,716,364 N/A	1,668,949 1,716,364	(47,415) N/A
TD AMERI- TRADE	APOLLO GRP INC CL A AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,495,933	2,489,479 N/A	N/A N/A	N/A N/A	2,495,933 N/A	2,489,479 2,495,933	(6,454) N/A
TD AMERI- TRADE	BERKSHIRE HATHAWAY INC. AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,144,218	1,092,690 N/A	N/A N/A	N/A N/A	1,144,218 N/A	1,092,690 1,144,218	(51,528) N/A
TD AMERI- TRADE	CISCO SYSTEMS, INC. AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,216,278	1,231,864 N/A	N/A N/A	N/A N/A	1,216,278 N/A	1,231,864 1,216,278	15,586 N/A
TD AMERI- TRADE	CONOCO PHILLIPS AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,499,165	1,399,781 N/A	N/A N/A	N/A N/A	1,499,165 N/A	1,399,781 1,499,165	(99,384) N/A
TD AMERI- TRADE	DODGE & COX BAL FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,512,872	2,550,590 N/A	N/A N/A	N/A N/A	2,512,872 N/A	2,550,590 2,512,872	37,718 N/A
TD AMERI- TRADE	DOUBLELINE TOTAL RETURN AGGREGATE SALES AGGREGATE PURCHASES	N/A 6,580,452	6,547,100 N/A	N/A N/A	N/A N/A	6,580,452 N/A	6,547,100 6,580,452	(33,352) N/A



**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI-TRADE	EXELON CORP							
	AGGREGATE SALES	N/A	1,376,637	N/A	N/A	1,386,618	1,376,637	(9,981)
	AGGREGATE PURCHASES	1,386,618	N/A	N/A	N/A	N/A	1,386,618	N/A
TD AMERI-TRADE	FAIRHOLME FD							
	AGGREGATE SALES	N/A	1,336,136	N/A	N/A	1,400,018	1,336,136	(63,882)
	AGGREGATE PURCHASES	1,400,018	N/A	N/A	N/A	N/A	1,400,018	N/A
TD AMERI-TRADE	FAIRHOLME FOCUSED INCOME							
	AGGREGATE SALES	N/A	4,823,737	N/A	N/A	4,831,805	4,823,737	(8,068)
	AGGREGATE PURCHASES	4,831,805	N/A	N/A	N/A	N/A	4,831,805	N/A
TD AMERI-TRADE	FIRST EAGLE OVERSEAS FD							
	AGGREGATE SALES	N/A	3,695,928	N/A	N/A	3,560,968	3,695,928	134,960
	AGGREGATE PURCHASES	3,560,968	N/A	N/A	N/A	N/A	3,560,968	N/A
TD AMERI-TRADE	FPA CRESCENT PORT							
	AGGREGATE SALES	N/A	2,179,747	N/A	N/A	2,206,967	2,179,747	(27,220)
	AGGREGATE PURCHASES	2,206,967	N/A	N/A	N/A	N/A	2,206,967	N/A
TD AMERI-TRADE	ING VALUE CHOICE FD CL I							
	AGGREGATE SALES	N/A	3,603,618	N/A	N/A	3,398,329	3,603,618	205,289
	AGGREGATE PURCHASES	3,398,329	N/A	N/A	N/A	N/A	3,398,329	N/A
TD AMERI-TRADE	ISHARES BARCLAYS TIPS BOND							
	AGGREGATE SALES	N/A	2,472,821	N/A	N/A	2,408,285	2,472,821	64,536
	AGGREGATE PURCHASES	2,408,285	N/A	N/A	N/A	N/A	2,408,285	N/A
TD AMERI-TRADE	ISHARES DJ US BASIC MATERI							
	AGGREGATE SALES	N/A	1,178,429	N/A	N/A	1,113,305	1,178,429	65,124
	AGGREGATE PURCHASES	1,113,305	N/A	N/A	N/A	N/A	1,113,305	N/A
TD AMERI-TRADE	ISHARES MSCI MEXICO							
	AGGREGATE SALES	N/A	1,417,342	N/A	N/A	1,325,754	1,417,342	91,588
	AGGREGATE PURCHASES	1,325,754	N/A	N/A	N/A	N/A	1,325,754	N/A



**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	ISHS LEHMAN 1-3 TR TREAS B AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,846,465	1,848,129 N/A	N/A N/A	N/A N/A	1,846,465 N/A	1,848,129 1,846,465	1,664 N/A
TD AMERI- TRADE	ISHS MSCI EAFE INDEX FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,372,820	1,351,597 N/A	N/A N/A	N/A N/A	1,372,820 N/A	1,351,597 1,372,820	(21,223) N/A
TD AMERI- TRADE	JANUS TRITON FD CL T AGGREGATE SALES AGGREGATE PURCHASES	N/A 4,506,801	5,053,653 N/A	N/A N/A	N/A N/A	4,506,801 N/A	5,053,653 4,506,801	546,852 N/A
TD AMERI- TRADE	JOHNSON & JOHNSON AGGREGATE SALES AGGREGATE PURCHASES	N/A 3,385,447	3,386,596 N/A	N/A N/A	N/A N/A	3,385,447 N/A	3,386,596 3,385,447	1,149 N/A
TD AMERI- TRADE	MARKET VECTORS RUSSIA ETF AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,559,756	1,560,801 N/A	N/A N/A	N/A N/A	1,559,756 N/A	1,560,801 1,559,756	1,045 N/A
TD AMERI- TRADE	MOLSON COORS BREWING CO AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,904,274	1,915,821 N/A	N/A N/A	N/A N/A	1,904,274 N/A	1,915,821 1,904,274	11,547 N/A
TD AMERI- TRADE	PERMANENT PERM PORTF AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,084,863	2,250,000 N/A	N/A N/A	N/A N/A	2,084,863 N/A	2,250,000 2,084,863	165,137 N/A
TD AMERI- TRADE	PIMCO EMERGING LOCAL BOND F AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,871,296	2,875,948 N/A	N/A N/A	N/A N/A	2,871,296 N/A	2,875,948 2,871,296	4,652 N/A
TD AMERI- TRADE	PIMCO FOREIGN BOND FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,505,927	2,476,509 N/A	N/A N/A	N/A N/A	2,505,927 N/A	2,476,509 2,505,927	(29,418) N/A



**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI-TRADE	PIMCO STOCKPLUS TR SHORT TR AGGREGATE SALES AGGREGATE PURCHASES	N/A 5,869,046	4,696,998 N/A	N/A N/A	N/A N/A	5,869,046 N/A	4,696,998 5,869,046	(1,172,048) N/A
TD AMERI-TRADE	RAYTHEON CO. AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,450,135	1,450,852 N/A	N/A N/A	N/A N/A	1,450,135 N/A	1,450,852 1,450,135	717 N/A
TD AMERI-TRADE	SECTOR SPDR TR SHS BEN INT AGGREGATE SALES AGGREGATE PURCHASES	N/A 4,780,034	4,711,100 N/A	N/A N/A	N/A N/A	4,780,034 N/A	4,711,100 4,780,034	(68,934) N/A
TD AMERI-TRADE	SPDR S&P 500 ETF TR AGGREGATE SALES AGGREGATE PURCHASES	N/A 22,430,806	22,547,895 N/A	N/A N/A	N/A N/A	22,430,806 N/A	22,547,895 22,430,806	117,089 N/A
TD AMERI-TRADE	TCW EMERGING MARKETS INCOME AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,895,912	1,887,035 N/A	N/A N/A	N/A N/A	1,895,912 N/A	1,887,035 1,895,912	(8,877) N/A
TD AMERI-TRADE	VANGUARD MSCI EMERGING MARK AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,268,235	1,310,055 N/A	N/A N/A	N/A N/A	1,268,235 N/A	1,310,055 1,268,235	41,820 N/A
TD AMERI-TRADE	VANGUARD WELLINGTON FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,509,627	1,543,722 N/A	N/A N/A	N/A N/A	1,509,627 N/A	1,543,722 1,509,627	34,095 N/A
TD AMERI-TRADE	VANGUARD WELLESLEY INCOME FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,500,018	1,508,822 N/A	N/A N/A	N/A N/A	1,500,018 N/A	1,508,822 1,500,018	8,804 N/A
TD AMERI-TRADE	WAL-MART STORES INC AGGREGATE SALES AGGREGATE PURCHASES	N/A 3,962,117	3,981,643 N/A	N/A N/A	N/A N/A	3,962,117 N/A	3,981,643 3,962,117	19,526 N/A



**NORTHERN OHIO
PROFIT SHARING PLAN**

**FINANCIAL STATEMENTS
WITH SUPPLEMENTARY INFORMATION**

YEARS ENDED DECEMBER 31, 2011 AND 2010



TABLE OF CONTENTS

	<u>Page</u>
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	2
Statements of Changes in Net Assets Available for Benefits	3
Notes to Financial Statements	4
SUPPLEMENTARY INFORMATION	
Financial Schedules	
Schedule of Assets Held for Investment Purposes at End of Year - 2011	12
Schedule of Reportable Transactions - 2011	14





Payne Nickles & Company

Certified Public Accountants and Business Advisors

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
of **Northern Ohio Profit Sharing Plan**
Norwalk, Ohio

We have audited the accompanying statements of net assets available for benefits of the **Northern Ohio Profit Sharing Plan** as of December 31, 2011 and 2010, and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the **Northern Ohio Profit Sharing Plan** as of December 31, 2011 and 2010, and the changes in its net assets available for benefits for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedules of assets held for investment purposes at end of year and reportable transactions, together referred to as "supplemental information", are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. This supplemental information is the responsibility of the Plan's management. The supplemental information has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Payne, Nickles & Company

Norwalk, Ohio
October 10, 2012

**NORTHERN OHIO
PROFIT SHARING PLAN**

**Statements of Net Assets Available for Benefits
December 31**

Assets	<u>2011</u>	<u>2010</u>
Investments:		
Mutual funds, at fair value	\$11,072,606	\$18,435,045
Common stocks, at fair value	<u>9,290,844</u>	<u>4,185,940</u>
Total investments	20,363,450	22,620,985
Receivables:		
Employer contributions	1,358,623	1,127,598
Cash, interest-bearing	<u>2,462,364</u>	<u>16,014</u>
Total assets	24,184,437	23,764,597
Withheld taxes payable	<u>(4,073)</u>	<u>-</u>
Net assets available for benefits	<u>\$24,180,364</u>	<u>\$23,764,597</u>

The accompanying notes are an integral part of these financial statements.



**NORTHERN OHIO
PROFIT SHARING PLAN**

**Statements of Changes in Net Assets Available for Benefits
For the years ended December 31**

	<u>2011</u>	<u>2010</u>
Additions:		
Additions to net assets attributed to:		
Investment income:		
Interest	\$ 11,222	\$ 687
Dividends	<u>617,571</u>	<u>408,691</u>
	628,793	409,378
Net appreciation (depreciation) in fair market value of investments	(560,466)	107,144
Employer contributions	<u>1,358,623</u>	<u>1,149,192</u>
Total additions	1,426,950	1,665,714
Deductions:		
Deductions from net assets attributed to:		
Benefits paid to participants	1,006,588	5,180,433
Administrative expenses	<u>4,595</u>	<u>913</u>
Total deductions	<u>1,011,183</u>	<u>5,181,346</u>
Net increase (decrease) in net assets available for benefits	415,767	(3,515,632)
Net assets available for benefits beginning of year	<u>23,764,597</u>	<u>27,280,229</u>
Net assets available for benefits end of year	<u>\$24,180,364</u>	<u>\$23,764,597</u>

The accompanying notes are an integral
part of these financial statements.



NORTHERN OHIO PROFIT SHARING PLAN

Notes to Financial Statements For the years ended December 31, 2011 and 2010

1. Description of the plan

The following description of the Northern Ohio Profit Sharing Plan (Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

Effective March 1, 1993, the Lake Erie Construction Company Profit Sharing Plan and Trust was renamed the Northern Ohio Profit Sharing Plan and Trust. At that same date the Plan was amended and restated in its entirety to become a multiple employer plan and to change its year end to December 31. The Plan was subsequently amended and restated, effective October 15, 2008, and renamed the Northern Ohio Profit Sharing Plan. The restated plan allows for non-elective contributions to three separate groups of participants in such proportion that each participant's compensation bears to the total compensation of all participants within each group or in equal amounts or percentages of compensation for that group. At December 31, 2007, the following companies are adopting employers of the Plan (the Companies): Lake Erie Construction Company, Maple City Development Company, and Firelands Supply Company.

On November 30, 2011, the Northern Ohio Profit Sharing Plan was amended for Plan years beginning after December 31, 2010 (2011 Plan year) to include American Highway Safety, LLC as an adopting employer of the Plan. All other terms and provisions of the Plan remained the same.

The Plan is a defined contribution plan covering all full-time employees of the Companies who have one year of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

The Plan provides for annual contributions in such amounts as the Companies shall determine, but not to exceed limitations imposed by the Internal Revenue Code, and allows for participant contributions in the form of rollover amounts from other qualified plans. All contributions to the Plan are nonparticipant-directed. The Plan provides for vesting with the participants at the rate of 20% after two years of service, increasing 20% per year thereafter.



1. Description of the plan - continued

Participant accounts

Each participant's account is credited with an allocation of (a) the Companies' contributions, (b) Plan earnings, and (c) forfeitures of terminated participants' nonvested accounts. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Forfeited accounts

Forfeitures of terminated participants' nonvested accounts amounted to \$16,801 and \$0 for 2011 and 2010, respectively.

Payment of benefits

On termination of service, a participant may elect to receive either a lump-sum amount equal to the vested balance of his or her account, or annual installments over a period of life expectancy, as set forth in the Plan. Any participant who has completed at least six years of service with the Company may withdraw all or any portion of his vested interest in his account, within the limitations and conditions set forth in the Plan.

2. Summary of significant accounting policies

Basis of accounting

Accounting records are maintained by the Trustee on the cash basis. The financial statements herein include all material adjustments necessary to place the financial statements on the accrual basis of accounting. The Annual Return/Report of Employee Benefit Plan is filed on the cash basis.

Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that effect certain reported amounts and disclosures. Accordingly, actual results could differ from these estimates.

Financial instruments - concentration of credit risk

The Plan places its temporary cash investments with financial institutions in amounts which may exceed the federally insured deposit limits.



2. Summary of significant accounting policies - continued

Investment valuation and income recognition

Investment transactions are recorded by the Trustee on the trade-date basis. Investments owned are reflected in the statement of net assets available for plan benefits at market value based on quoted market prices. See financial schedules for a list of investments held at December 31, 2011, and any reportable transactions required to be disclosed.

Changes in unrealized appreciation (depreciation) of investments are reflected currently in net appreciation (depreciation) in fair market value of investments in the accompanying statements of changes in net assets available for benefits. Realized gains and losses are determined based on the original cost of the assets and are also included in net appreciation (depreciation) in fair market value of investments in the accompanying statements of changes in net assets available for benefits.

Administrative expenses

Certain administrative functions are performed by officers or employees of the Companies. No such officer or employee receives compensation from the Plan. Certain administrative expenses are paid directly by the Companies.

Payment of benefits

Benefits are recorded when paid.

Subsequent events

Management has evaluated subsequent events through October 10, 2012 the date the financial statements were available to be issued.

3. Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that a change could occur in the near term that could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits and the statement of changes in net assets available for benefits.



4. Tax determination

The Plan obtained its latest determination letter on May 4, 2009, in which the Internal Revenue Service stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

5. Plan termination

Although it has not expressed any intent to do so, the Companies have the right under the Plan to discontinue their contributions at any time or to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100 percent vested in their accounts and each participant and beneficiary will be paid the amount of his or her account balance in the Plan in a lump sum.

6. Contributions

For the years ended December 31, 2011 and 2010, employer contributions include contributions of \$136,383 and \$210,007, respectively, made by the participating employers of the Lake Erie Construction Company, Maple City Development Company, and Firelands Supply Company pension plan.

7. Fair value measurements

FASB ASC 820 establishes that fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (exit price) and establishes a fair value hierarchy based upon the inputs used to measure fair value. The three levels of the fair value hierarchy defined by FASB ASC 820 are described below:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices in active markets that are accessible at the measurement date for identical unrestricted assets or liabilities (for example, exchange quoted prices).



7. Fair value measurements - continued

Level 2 - Inputs to the valuation methodology are observable inputs, other than Level 1 prices, such as quoted prices for similar assets or liabilities in active markets, quoted prices in markets that are not sufficiently active to qualify as Level 1, other observable inputs, or inputs that can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 - Inputs to the valuation methodology are significant to the fair value measurement and unobservable (for example, supported by little or no market activity).

As required by FASB ASC 820, financial assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The Plan's assessment of the significance of a particular input to the fair value measurement requires judgment and may affect the valuation of the fair value of assets and liabilities and their placement within the fair value hierarchy levels. The Plan's investments accounted for at fair value as of December 31, 2011 are summarized below:

	<u>Level 1</u>	<u>Total Fair Value</u>
Mutual funds	\$11,072,606	\$11,072,606
Common stocks	<u>9,290,844</u>	<u>9,290,844</u>
	<u>\$20,363,450</u>	<u>\$20,363,450</u>

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2011.

Mutual funds and common stocks are valued at the net asset value of shares held by the Plan at year end.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement as of the reporting date.

Gains and losses (realized and unrealized) are included in net appreciation (depreciation) in fair market value of investments in the statement of changes in net assets available for benefits for the years ended December 31, 2011 and 2010.



8. Schedule of investments

The following table presents investments, all of which are nonparticipant-directed, which represent five percent or more of the Plan's net assets available for benefits at the beginning of their respective year ends.

<u>Issuer</u>	<u>Description</u>	<u>No. of Units</u>	Fair Value December 31	
			<u>2011</u>	<u>2010</u>
Mutual Funds:				
First Eagle SoGen Funds	First Eagle Overseas Cl I	95,022	-	\$2,183,611
ING Funds	Value Choice Fd Cl 1	204,408	-	3,615,984
Janus Funds	Triton Fund T	227,909	-	3,742,263
Permanent Portfolio Fund	Permanent Fund	48,040	2,214,154	-
		48,726	-	2,232,116
Pimco Funds	Stockplus Sh Strategic Fd	1,136,742	-	4,967,564
Stocks:				
I Shares Barclays	1-3 Yr. Treasury Bond	22,000	-	1,847,560
Cash, interest-bearing:				
TD Ameritrade	Cash & Money Market	2,462,364	2,462,364	-

9. Reconciliation to Form 5500

As discussed in Note 2, the Plan's financial statements are presented on the accrual basis of accounting and the Annual Return/Report of Employee Benefit Plan (Form 5500) is prepared and filed on the cash basis of accounting. The following schedule reconciles the differences between those two methods as of and for the year ended December 31, 2011 and the differences in classifications of investment income, gains and losses for the year ended December 31, 2011.

	Per financial <u>statements</u>	Adjustments to cash <u>basis</u>	Reclassifi- cations to Form 5500 <u>Presentation</u>	Per Form 5500
Investments:				
Mutual funds and common stocks	\$20,363,450	\$ -	\$ -	\$20,363,450
Receivables:				
Employer contributions	1,358,623	(1,358,623)	-	-
Cash	<u>2,462,364</u>	<u>-</u>	<u>-</u>	<u>2,462,364</u>
	24,184,437	(1,358,623)	-	22,825,814
Withheld taxes payable	<u>(4,073)</u>	<u>-</u>	<u>-</u>	<u>(4,073)</u>
Net assets available for benefits	<u>\$24,180,364</u>	<u>\$ (1,358,623)</u>	<u>\$ -</u>	<u>\$22,821,741</u>
Additions to net assets:				
Investment income:				
Interest	\$ 11,222	\$ -	\$ -	\$ 11,222
Dividends	617,571	-	(617,571)	-
Net appreciation	(560,466)	-	560,466	-
Employer contributions	1,358,623	(231,025)	-	1,127,598
Net investment gain	-	-	57,105	57,105
Deductions from net assets:				
Benefits paid	(1,006,588)	-	-	(1,006,588)
Administrative expenses	<u>(4,595)</u>	<u>-</u>	<u>-</u>	<u>(4,595)</u>
Net increase (decrease) in net assets available for benefits	<u>\$ 415,767</u>	<u>\$ (231,025)</u>	<u>\$ -</u>	<u>\$ 184,742</u>

SUPPLEMENTARY INFORMATION

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST
Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Plan # 333
Employer ID # 34-1262474

Schedule of Assets Held for Investment Purposes At End of Year - Line 4i

(a)	(b) Identity of issue	(c) Description of investment	(d) Cost	(e) Current value
	TD AMERITRADE MONEY MARKET	2,462,364 UNITS	2,462,364	2,462,364
	APPLIED MATERIALS, INC. COMMON	39,000 SHARES	439,100	417,690
	BECTON DICKINSON & CO COMMON	4,500 SHARES	333,154	336,240
	BERKSHIRE HATHAWAY, INC. CLASS B	3,290 SHARES	264,055	251,027
	BEST BUY CO INC. COMMON	29,000 SHARES	666,860	677,730
	BMC SOFTWARE INC. COMMON	6,700 SHARES	221,641	219,626
	CA INCORPORATED COMMON	9,300 SHARES	190,283	187,999
	CISCO SYSTEMS INC COMMON	18,200 SHARES	329,655	329,056
	CORELOGIC INC COMMON	44,400 SHARES	598,052	574,092
	EXELON CORP COMMON	9,400 SHARES	414,187	407,678
	FLUOR CORP COMMON	6,800 SHARES	329,532	341,700
	FOREST LABS INC COMMON	10,600 SHARES	310,902	320,756
	GENERAL DYNAMICS CORP COMMON	3,650 SHARES	231,305	242,396
	GILEAD SCIENCES INC COMMON	9,300 SHARES	368,470	380,649
	HEWLETT PACKARD CO COMMON	25,600 SHARES	755,280	659,456
	JP MORGAN CHASE & CO COMMON	9,900 UNITS	296,779	329,175
	MARKET VECTORS GOLD MINERS ETF	7,000 UNITS	368,338	360,010
	MEDTRONIC INC COMMON	5,850 SHARES	218,679	223,762
	MICROSOFT CORP COMMON	8,500 SHARES	219,898	220,660
	MOLSON COORS BREWING CLASS B	6,000 SHARES	234,379	261,240
	MURPHY OIL CORP COMMON	4,300 SHARES	238,654	239,682
	POSCO ADR	5,830 UNITS	566,793	478,643
	PROCTER GAMBLE CO COMMON	3,600 SHARES	227,921	240,156
	ROCHE HOLDINGS ADRS LTD COMMON	8,700 SHARES	358,186	370,185



Plan # 333
Employer ID # 34-1262474

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**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	CASH/MONEY MARKET AGGREGATE WITHDRAWALS AGGREGATE DEPOSITS	N/A N/A	138,468,739 N/A	N/A N/A	N/A N/A	138,468,739 2,446,350	138,468,739 N/A	0 N/A
TD AMERI- TRADE	AMER CENTY MUT FDS INC. TWN AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,400,000	1,433,315 N/A	N/A N/A	N/A N/A	1,400,000 N/A	1,433,315 1,400,000	33,315 N/A
TD AMERI- TRADE	ANNALY CAPITAL MGMT INC AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,716,364	1,668,949 N/A	N/A N/A	N/A N/A	1,716,364 N/A	1,668,949 1,716,364	(47,415) N/A
TD AMERI- TRADE	APOLLO GRP INC CL A AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,495,933	2,489,479 N/A	N/A N/A	N/A N/A	2,495,933 N/A	2,489,479 2,495,933	(6,454) N/A
TD AMERI- TRADE	BERKSHIRE HATHAWAY INC. AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,144,218	1,092,690 N/A	N/A N/A	N/A N/A	1,144,218 N/A	1,092,690 1,144,218	(51,528) N/A
TD AMERI- TRADE	CISCO SYSTEMS, INC. AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,216,278	1,231,864 N/A	N/A N/A	N/A N/A	1,216,278 N/A	1,231,864 1,216,278	15,586 N/A
TD AMERI- TRADE	CONOCO PHILLIPS AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,499,165	1,399,781 N/A	N/A N/A	N/A N/A	1,499,165 N/A	1,399,781 1,499,165	(99,384) N/A
TD AMERI- TRADE	DODGE & COX BAL FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,512,872	2,550,590 N/A	N/A N/A	N/A N/A	2,512,872 N/A	2,550,590 2,512,872	37,718 N/A
TD AMERI- TRADE	DOUBLELINE TOTAL RETURN AGGREGATE SALES AGGREGATE PURCHASES	N/A 6,580,452	6,547,100 N/A	N/A N/A	N/A N/A	6,580,452 N/A	6,547,100 6,580,452	(33,352) N/A



**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI-TRADE	EXELON CORP							
	AGGREGATE SALES	N/A	1,376,637	N/A	N/A	1,386,618	1,376,637	(9,981)
	AGGREGATE PURCHASES	1,386,618	N/A	N/A	N/A	N/A	1,386,618	N/A
TD AMERI-TRADE	FAIRHOLME FD							
	AGGREGATE SALES	N/A	1,336,136	N/A	N/A	1,400,018	1,336,136	(63,882)
	AGGREGATE PURCHASES	1,400,018	N/A	N/A	N/A	N/A	1,400,018	N/A
TD AMERI-TRADE	FAIRHOLME FOCUSED INCOME							
	AGGREGATE SALES	N/A	4,823,737	N/A	N/A	4,831,805	4,823,737	(8,068)
	AGGREGATE PURCHASES	4,831,805	N/A	N/A	N/A	N/A	4,831,805	N/A
TD AMERI-TRADE	FIRST EAGLE OVERSEAS FD							
	AGGREGATE SALES	N/A	3,695,928	N/A	N/A	3,560,968	3,695,928	134,960
	AGGREGATE PURCHASES	3,560,968	N/A	N/A	N/A	N/A	3,560,968	N/A
TD AMERI-TRADE	FPA CRESCENT PORT							
	AGGREGATE SALES	N/A	2,179,747	N/A	N/A	2,206,967	2,179,747	(27,220)
	AGGREGATE PURCHASES	2,206,967	N/A	N/A	N/A	N/A	2,206,967	N/A
TD AMERI-TRADE	ING VALUE CHOICE FD CL I							
	AGGREGATE SALES	N/A	3,603,618	N/A	N/A	3,398,329	3,603,618	205,289
	AGGREGATE PURCHASES	3,398,329	N/A	N/A	N/A	N/A	3,398,329	N/A
TD AMERI-TRADE	ISHARES BARCLAYS TIPS BOND							
	AGGREGATE SALES	N/A	2,472,821	N/A	N/A	2,408,285	2,472,821	64,536
	AGGREGATE PURCHASES	2,408,285	N/A	N/A	N/A	N/A	2,408,285	N/A
TD AMERI-TRADE	ISHARES DJ US BASIC MATERI							
	AGGREGATE SALES	N/A	1,178,429	N/A	N/A	1,113,305	1,178,429	65,124
	AGGREGATE PURCHASES	1,113,305	N/A	N/A	N/A	N/A	1,113,305	N/A
TD AMERI-TRADE	ISHARES MSCI MEXICO							
	AGGREGATE SALES	N/A	1,417,342	N/A	N/A	1,325,754	1,417,342	91,588
	AGGREGATE PURCHASES	1,325,754	N/A	N/A	N/A	N/A	1,325,754	N/A



**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	ISHS LEHMAN 1-3 TR TREAS B AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,846,465	1,848,129 N/A	N/A N/A	N/A N/A	1,846,465 N/A	1,848,129 1,846,465	1,664 N/A
TD AMERI- TRADE	ISHS MSCI EAFE INDEX FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,372,820	1,351,597 N/A	N/A N/A	N/A N/A	1,372,820 N/A	1,351,597 1,372,820	(21,223) N/A
TD AMERI- TRADE	JANUS TRITON FD CL T AGGREGATE SALES AGGREGATE PURCHASES	N/A 4,506,801	5,053,653 N/A	N/A N/A	N/A N/A	4,506,801 N/A	5,053,653 4,506,801	546,852 N/A
TD AMERI- TRADE	JOHNSON & JOHNSON AGGREGATE SALES AGGREGATE PURCHASES	N/A 3,385,447	3,386,596 N/A	N/A N/A	N/A N/A	3,385,447 N/A	3,386,596 3,385,447	1,149 N/A
TD AMERI- TRADE	MARKET VECTORS RUSSIA ETF AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,559,756	1,560,801 N/A	N/A N/A	N/A N/A	1,559,756 N/A	1,560,801 1,559,756	1,045 N/A
TD AMERI- TRADE	MOLSON COORS BREWING CO AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,904,274	1,915,821 N/A	N/A N/A	N/A N/A	1,904,274 N/A	1,915,821 1,904,274	11,547 N/A
TD AMERI- TRADE	PERMANENT PERM PORTF AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,084,863	2,250,000 N/A	N/A N/A	N/A N/A	2,084,863 N/A	2,250,000 2,084,863	165,137 N/A
TD AMERI- TRADE	PIMCO EMERGING LOCAL BOND F AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,871,296	2,875,948 N/A	N/A N/A	N/A N/A	2,871,296 N/A	2,875,948 2,871,296	4,652 N/A
TD AMERI- TRADE	PIMCO FOREIGN BOND FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 2,505,927	2,476,509 N/A	N/A N/A	N/A N/A	2,505,927 N/A	2,476,509 2,505,927	(29,418) N/A



**SCHEDULE H
FORM 5500**

FINANCIAL SCHEDULES

2011

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employer ID # 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	PIMCO STOCKPLUS TR SHORT TR AGGREGATE SALES AGGREGATE PURCHASES	N/A 5,869,046	4,696,998 N/A	N/A N/A	N/A N/A	5,869,046 N/A	4,696,998 5,869,046	(1,172,048) N/A
TD AMERI- TRADE	RAYTHEON CO. AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,450,135	1,450,852 N/A	N/A N/A	N/A N/A	1,450,135 N/A	1,450,852 1,450,135	717 N/A
TD AMERI- TRADE	SECTOR SPDR TR SHS BEN INT AGGREGATE SALES AGGREGATE PURCHASES	N/A 4,780,034	4,711,100 N/A	N/A N/A	N/A N/A	4,780,034 N/A	4,711,100 4,780,034	(68,934) N/A
TD AMERI- TRADE	SPDR S&P 500 ETF TR AGGREGATE SALES AGGREGATE PURCHASES	N/A 22,430,806	22,547,895 N/A	N/A N/A	N/A N/A	22,430,806 N/A	22,547,895 22,430,806	117,089 N/A
TD AMERI- TRADE	TCW EMERGING MARKETS INCOME AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,895,912	1,887,035 N/A	N/A N/A	N/A N/A	1,895,912 N/A	1,887,035 1,895,912	(8,877) N/A
TD AMERI- TRADE	VANGUARD MSCI EMERGING MARK AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,268,235	1,310,055 N/A	N/A N/A	N/A N/A	1,268,235 N/A	1,310,055 1,268,235	41,820 N/A
TD AMERI- TRADE	VANGUARD WELLINGTON FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,509,627	1,543,722 N/A	N/A N/A	N/A N/A	1,509,627 N/A	1,543,722 1,509,627	34,095 N/A
TD AMERI- TRADE	VANGUARD WELLESLEY INCOME FD AGGREGATE SALES AGGREGATE PURCHASES	N/A 1,500,018	1,508,822 N/A	N/A N/A	N/A N/A	1,500,018 N/A	1,508,822 1,500,018	8,804 N/A
TD AMERI- TRADE	WAL-MART STORES INC AGGREGATE SALES AGGREGATE PURCHASES	N/A 3,962,117	3,981,643 N/A	N/A N/A	N/A N/A	3,962,117 N/A	3,981,643 3,962,117	19,526 N/A



SCHEDULE H
FORM 5500

FINANCIAL SCHEDULES

2010

Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employ 34 1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	ARIEL GROWTH FD- ARIEL FD MUTUAL FUND PURCHASES SALES	4,775,000 N/A	N/A 4,640,090	N/A N/A	N/A N/A	N/A 4,775,000	4,775,000 4,640,090	N/A 134,910
TD AMERI- TRADE	ARIEL GROW PD-CALVERT ARI MUTUAL FUND PURCHASES SALES	2,000,000 N/A	N/A 2,064,008	N/A N/A	N/A N/A	N/A 2,000,000	2,000,000 2,064,008	N/A 64,008
TD AMERI- TRADE	BARON PARTNERS PD MUTUAL FUND PURCHASES SALES	1,719,000 N/A	N/A 1,562,496	N/A N/A	N/A N/A	N/A 1,719,000	1,719,000 1,562,496	N/A 156,504
TD AMERI- TRADE	FAIRHOLME FD MUTUAL FUND AGGREGATE SALES	N/A	6,059,944	N/A	N/A	4,929,770	6,059,944	1,130,174
TD AMERI- TRADE	FIDELITY BLUE CHIP GROW F MUTUAL FUND PURCHASES SALES	1,650,036 N/A	N/A 1,597,809	N/A N/A	N/A N/A	N/A 1,650,036	1,650,036 1,597,809	N/A 52,227
TD AMERI- TRADE	FIDELITY CONV SECS PD MUTUAL FUND PURCHASES SALES	1,253,241 N/A	N/A 1,310,555	N/A N/A	N/A N/A	N/A 1,253,241	1,253,241 1,310,555	N/A 57,314
TD AMERI- TRADE	FIRST EAGLE OVERSEAS FD MUTUAL FUND SALES	N/A	1,936,924	N/A	N/A	1,824,238	1,936,924	112,686
TD AMERI- TRADE	FPA CRESCENT PORT MUTUAL FUND AGGREGATE SALES	N/A	2,422,829	N/A	N/A	1,654,748	2,422,829	768,081
TD AMERI- TRADE	HEARTLAND GRP INC VAL PLU MUTUAL FUND PURCHASES SALES	2,500,000 N/A	N/A 2,290,193	N/A N/A	N/A N/A	N/A 2,500,000	2,500,000 2,290,193	N/A 209,807



Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employ 34 1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI- TRADE	HUSSMAN STRATEGIC GROWTH MUTUAL FUND PURCHASES SALES	2,000,018 N/A	N/A 1,974,834	N/A N/A	N/A N/A	N/A 2,000,018	2,000,018 1,974,834	N/A -25,184
TD AMERI- TRADE	HUSSMAN STRATEGIC TOTAL MUTUAL FUND AGGREGATE SALES	N/A	3,994,011	N/A	N/A	3,874,668	3,994,011	119,342
TD AMERI- TRADE	ISHARES MSCI BRAZIL INDEX STOCK PURCHASES SALES	2,920,199 N/A	N/A 2,836,805	N/A N/A	N/A N/A	N/A 2,920,199	2,920,199 2,836,805	N/A 83,393
TD AMERI- TRADE	ISHARES MSCI EMRG MKTS IN STOCK PURCHASES AGGREGATE SALES	2,369,365 N/A	N/A 2,465,425	N/A N/A	N/A N/A	N/A 2,369,365	2,369,365 2,465,425	N/A 96,060
TD AMERI- TRADE	ISHARES RUSSELL 2000 IND STOCK PURCHASES AGGREGATE SALES	10,598,429 N/A	N/A 10,299,165	N/A N/A	N/A N/A	N/A 10,598,429	10,598,429 10,299,165	N/A -299,264
TD AMERI- TRADE	ISHS RUSSELL MIDCAP VALUE STOCK PURCHASES AGGREGATE SALES	1,278,425 N/A	N/A 1,227,778	N/A N/A	N/A N/A	N/A 1,278,425	1,278,425 1,227,778	N/A -50,647
TD AMERI- TRADE	PERMANENT PERM PORTFOLIO MUTUAL FUND PURCHASES AGGREGATE SALES	3,920,842 N/A	N/A 4,218,596	N/A N/A	N/A N/A	N/A 3,920,842	3,920,842 4,218,596	N/A 297,755
TD AMERI- TRADE	PIMCO FDS PAC INVT MGMT S MUTUAL FUND PURCHASES AGGREGATE SALES	6,812,576 N/A	N/A 6,990,969	N/A N/A	N/A N/A	N/A 6,812,576	6,812,576 6,990,969	N/A 178,393
TD AMERI- TRADE	PIMCO INTL STOCK MUTUAL FUND PURCHASES AGGREGATE SALES	2,190,199 N/A	N/A 2,133,226	N/A N/A	N/A N/A	N/A 2,190,199	2,190,199 2,133,226	N/A -56,973
TD AMERI- TRADE	PIMCO STOCKPLUS TR SHORT MUTUAL FUND PURCHASES AGGREGATE SALES	6,245,732 N/A	N/A 6,205,542	N/A N/A	N/A N/A	N/A 6,245,732	6,245,732 6,205,542	N/A -40,190



Plan: NORTHERN OHIO PROFIT SHARING PLAN AND TRUST

Plan # 333

Sponsor: LAKE ERIE CONSTRUCTION COMPANY

Employ 34-1262474

Schedule of Reportable Transactions - Line 4j

(a) Identity of party	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred w/ transaction	(g) Cost of asset	(h) Current value of asset on trans. date	(i) Net gain or (loss)
TD AMERI-TRADE	POWERSHARES QQQ NASDAQ 10 MUTUAL FUND PURCHASES	1,446,510	N/A	N/A	N/A	N/A	1,446,510	N/A
	AGGREGATE SALES	N/A	1,449,667	N/A	N/A	1,446,510	1,449,667	3,157
TD AMERI-TRADE	SPDR S&P 500 ETF TR MUTUAL FUND PURCHASES	44,657,174	N/A	N/A	N/A	N/A	44,657,174	N/A
	AGGREGATE SALES	N/A	44,508,032	N/A	N/A	44,657,174	44,508,032	-149,142
TD AMERI-TRADE	THE WEITZ FUNDS PARTNERS MUTUAL FUND PURCHASES	1,719,000	N/A	N/A	N/A	N/A	1,719,000	N/A
	AGGREGATE SALES	N/A	1,606,167	N/A	N/A	1,719,000	1,606,167	-112,833
TD AMERI-TRADE	ULTRA S&P 500 PROSHARES MUTUAL FUND PURCHASES	9,053,061	N/A	N/A	N/A	N/A	9,053,061	N/A
	AGGREGATE SALES	N/A	9,075,956	N/A	N/A	9,053,061	9,075,956	22,895
TD AMERI-TRADE	ULTRASHORT RUSSELL 2000 P MUTUAL FUND PURCHASES	2,394,815	N/A	N/A	N/A	N/A	2,394,815	N/A
	AGGREGATE SALES	N/A	2,349,874	N/A	N/A	2,394,815	2,349,874	-44,940
TD AMERI-TRADE	ULTRASHORT S&P500 PROSHAR MUTUAL FUND PURCHASES	9,968,988	N/A	N/A	N/A	N/A	9,968,988	N/A
	AGGREGATE SALES	N/A	9,938,770	N/A	N/A	9,968,988	9,938,770	-30,218
TD AMERI-TRADE	VANGUARD MSCI EMERGING MA MUTUAL FUND PURCHASES	3,856,893	N/A	N/A	N/A	N/A	3,856,893	N/A
	AGGREGATE SALES	N/A	4,124,016	N/A	N/A	3,856,893	4,124,016	267,123
TD AMERI-TRADE	VANGUARD WELLESLEY INCOME MUTUAL FUND PURCHASES	3,009,451	N/A	N/A	N/A	N/A	3,009,451	N/A
	AGGREGATE SALES	N/A	3,202,187	N/A	N/A	3,009,451	3,202,187	192,736
TD AMERI-TRADE	WELLS FARGO ADV DISC FD INC MUTUAL FUND PURCHASES	1,650,000	N/A	N/A	N/A	N/A	1,650,000	N/A
	AGGREGATE SALES	N/A	1,545,003	N/A	N/A	1,650,000	1,545,003	-104,997
TD AMERI-TRADE	YACHTMAN FD INC MUTUAL FUND PURCHASES	2,300,000	N/A	N/A	N/A	N/A	2,300,000	N/A
	AGGREGATE SALES	N/A	2,264,631	N/A	N/A	2,300,000	2,264,631	35,369



Form 5500Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**OMB Nos. 1210-0110
1210-0089**2011****This Form is Open to Public Inspection****Part I Annual Report Identification Information**For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

- A** This return/report is for: ☐ a multiemployer plan; ☒ a multiple-employer plan; or
☐ a single-employer plan; ☐ a DFE (specify) _____
- B** This return/report is: ☐ the first return/report; ☐ the final return/report;
☒ an amended return/report; ☐ a short plan year return/report (less than 12 months).
- C** If the plan is a collectively-bargained plan, check here. ☐
- D** Check box if filing under: ☐ Form 5558; ☐ automatic extension; ☐ the DFVC program;
☐ special extension (enter description) _____

Part II Basic Plan Information—enter all requested information**1a** Name of plan Northern Ohio Profit Sharing Plan and Trust**1b** Three-digit plan number (PN) ▶ 33312/11/1959**2a** Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan)Lake Erie ConstructionP. O. Box 777NorwalkOH 44857**2b** Employer Identification Number (EIN)
34-1262474**2c** Sponsor's telephone number
(419) 668-3302**2d** Business code (see Instructions)
237990**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE		<u>1/29/14</u>	<u>MICHAEL BLEILE</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		<u>1/29/14</u>	<u>MICHAEL BLEILE</u>
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2011)
v.012611

Attachment to 2011 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Northern Ohio Profit Sharing Plan and Trust

EIN: 34-1262474

Plan Sponsor's Name Lake Erie Construction

PN: 333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	TD AMERITRADE MONEY MARKET	2462364 UNITS	2,462,364	2,462,364
	APPLIED MATERIALS, INC.	39000 SHARES	439,100	417,690
	BECTON DICKINSON & CO.	4500 SHARES	333,154	336,240
	BERKSHIRE HATHAWAY, INC. CLASS B	3290 SHARES	264,055	251,027
	BEST BUY CO. INC. COMMON	29000 SHARES	666,860	677,730
	BMC SOFTWARE, INC. COMMON	6700 SHARES	221,641	219,626
	CA INCORPORATED COMMON	9300 SHARES	190,283	187,999

Attachment to 2011 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Northern Ohio Profit Sharing Plan and Trust

EIN: 34-1262474

Plan Sponsor's Name Lake Erie Construction

PN: 333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	HEWLETT PACKARD CO COMMON	25600 SHARES	755,280	659,456
	JP MORGAN CHASE & CO COMMON	9900 UNITS	296,779	329,175
	MARKET VECTORS GOLD MINERS ETF	7000 UNITS	368,338	360,010
	MEDTRONIC INC COMMON	5850 SHARES	218,679	223,762
	MICROSOFT CORP COMMON	8500 SHARES	219,898	220,660
	MOLSON COORS BREWING CLASS B	6000 SHARES	234,379	261,240
	MURPHY OIL CORP COMMON	4300 SHARES	238,654	239,682

Attachment to 2011 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Northern Ohio Profit Sharing Plan and Trust

EIN: 34-1262474

Plan Sponsor's Name Lake Erie Construction

PN: 333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	POSCO ADR	5830 UNITS	566,793	478,643
	PROCTER GAMBLE CO COMMON	3600 SHARES	227,921	240,156
	ROCHE HOLDINGS ADRS LTD COMMON	8700 SHARES	358,186	370,185
	SPDR GOLD TR GOLD SHS	3000 UNITS	471,775	455,970
	TEVA PHARMACEUTICAL INDS LTD ADR	5900 UNITS	232,348	238,124
	TOTAL S A SPONSORED ADR	6000 UNITS	281,044	306,660
	WELLS FARGO CO COMMON	8000 SHARES	216,500	220,480

Attachment to 2011 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Northern Ohio Profit Sharing Plan and Trust

EIN: 34-1262474

Plan Sponsor's Name Lake Erie Construction

PN: 333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
		1063727		
	DOUBLE LINE TOTAL RETURN BOND	96439 UNITS	1,085,365	1,063,727
	FIDELITY FDS GINNE MAE PRTF	94194 UNITS	1,123,226	1,115,257
	FIRST EAGLE SOGEN FDS INC. OVERSEAS	50138 UNITS	1,117,966	1,035,346
	HUSSMAN INVT TR STRAT TOTAL RET FD	75930 UNITS	1,000,018	943,812
	HUSSMAN INVT TR STRAT TOTAL RET FD	92687 UNITS	1,172,538	1,140,054
	PERMANENT PORTFOLIO FUND COMMON	48040 UNITS	2,207,759	2,214,154
	USAA MUT FD INC INCOME FD SER	57921 UNITS	763,816	757,608

Plan Name	Northern Ohio Profit Sharing Plan and Trust	EIN:	34-1262474
Plan Sponsor's Name	Lake Erie Construction	PN:	333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	VANGUARD WELLESLEY INCOME FUND	50865 UNITS	1,161,469	1,166,337
	VIRTUS FUNDS EMERG MKTS OPPO FD CL	64201 UNITS	608,651	558,553
	YACKTMAN FD INC.	57389 UNITS	1,011,958	1,077,760

Attachment to 2011 Form 5500
Schedule H, line 4i - Schedule of Assets (Acquired or Disposed of Within Year)

Plan Name Northern Ohio Profit Sharing Plan and Trust

EIN: 34-1262474

Plan Sponsor's Name Lake Erie Construction

PN: 333

(a) Identity of issue, borrower, lessor, or similar party	(b) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(c) Cost of acquisitions	(d) Proceeds of dispositions
CISCO SYSTEMS INC. COMMON	18200 SHARES	329,655	329,056
CORELOGIC INC. COMMON	44400 SHARES	598,052	574,092
EXELON CORP COMMON	9400 SHARES	414,187	407,678
FLUOR CORP COMMON	6800 SHARES	329,532	341,700
FOREST LABS INC. COMMON	10600 SHARES	310,902	320,756
GENERAL DYNAMICS CORP COMMON	3650 SHARES	231,305	242,396
GILEAD SCIENCES INC. COMMON	9300 SHARES	368,470	380,649