

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93000005614**

1. Corporation Name

KELLEY INDIANA, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 **36 South Pennsylvania St.**

2a. Mailing Address

26 **36 South Pennsylvania St.**

Suite, Apt. #, etc

Suite, Apt. #, etc

22 **Suite 550**

27 **Suite 550**

City & State

City & State

23 **Indianapolis, IN**

28 **Indianapolis, IN**

Zip

Zip

Country

Country

24 **46204**

25 **U.S.A.**

29 **46204**

30 **U.S.A.**

9. Name and Address of Current Registered Agent

**E.W. Kelley
131 Woden Way, S.E.
Winter Haven FL 33884**

3. Date Incorporated or Qualified
November 16, 1995

3a. Date of Last Report
NA

4. FEI Number
35-1164047

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

S. Sue Aramian

S. Sue Aramian

July 9, 1996

Signature typed or printed name of registered agent and firm if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **C/D** ☐ DELETE
NAME **E.W. Kelley**
STREET ADDRESS **131 Woden Way S.E.**
CITY-ST-ZIP **Winter Haven, FL 33884**

TITLE **P/D** ☐ DELETE
NAME **E.W. Kelley II**
STREET ADDRESS **115 Orchard Place**
CITY-ST-ZIP **Ithaca NY 14850**

TITLE **V/Asst. T/D** ☐ DELETE
NAME **W.W. Kelley**
STREET ADDRESS **R.R. 1, Hwy 31**
CITY-ST-ZIP **Sharpsville, IN 46068**

TITLE **V/D** ☐ DELETE
NAME **W.L. Kelley**
STREET ADDRESS **8517 Greencastle Dr**
CITY-ST-ZIP **Charlotte, NC 28210**

TITLE **S/T/D** ☐ DELETE
NAME **W.E. Kelley**
STREET ADDRESS **131 Woden Way, S.E.**
CITY-ST-ZIP **Winter Haven FL 33884**

TITLE **D** ☐ DELETE
NAME **K.K. Germaine**
STREET ADDRESS **DoDDS PSC 79, Box 20038**
CITY-ST-ZIP **APD AP 96364-0038**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

**400001899774
-07/19/96--01072--034
***233.75**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

S. Sue Aramian
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 9, 1996

(317) 63-4240

CR2E034 (3/96)

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ANNUAL REPORT 1996
(Continued)

KELLEY INDIANA, INC.
36 South Pennsylvania St.
Suite 550
Indianapolis, Indiana 46204
U. S. A.

12. Officers and Directors (cont.)

Asst. V
Chris M. Kelley
R. R. 1
U. S. Highway 31
Sharpville, IN 46068

Asst. S
S. Sue Aramian
14 Sutton Place South
New York, New York 10022