## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 16, 2001 8:00 am Secretary of State DOCUMÊNT # F98000001,707 05-16-2001 90220 044 \*\*\*550.00 SIMCO ACQUISITIONS, INC. Principal Place of Business Mailing Address 115 W. WASHINGTON STREET PO BOX 7066 TAX DEPT INDIANAPOLIS IN 46204 INDIANAPOUS IN 46207 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 35-2041281 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME SOKOLOV, RICHARD S STREET ADDRESS STREET ADDRESS 115 W. WASHINGTON STREET CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN TITLE ☐ Delete TITLE ☐ Change Addition NAME FOXWORTHY, RANDOLPH L NAME STREET ADDRESS 115 W. WASHINGTON STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN TITLE ☐ Delete TITLE Change ☐ Addition S NAME. BARKLEY, JAMES L NAME STREET ADDRESS STREET ADDRESS 115 W. WASHINGTON STREET CITY-ST-ZIP CITY-ST-ZIP Indianapolis in TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME SIMON, HERBERT STREET ADDRESS STREET ADDRESS 115 W. WASHINGTON STREET CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN recisorer TITLE Delete Change TITLE Andrew Fuster Sten St. ☐ Addition NAME NAME STERRETT, STEPHEN E STREET ADDRESS STREET ADDRESS 115 W. WASHINGTON STREET CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN TITLE ☐ Delete TITLE Change ☐ Addition NAME HORNE, ADRIANNE M NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusteel empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

115 W. WASHINGTON STREET

INDIANAPOLIS IN

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED