

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001707

FILED
Apr 12, 2010
Secretary of State

Entity Name: SIMCO ACQUISITIONS, INC.

Current Principal Place of Business:

225 W. WASHINGTON ST.
INDIANAPOLIS, IN 46204

New Principal Place of Business:

Current Mailing Address:

225 W. WASHINGTON ST., PO BOX 7033
C/O CORPORATE PARALEGAL
INDIANAPOLIS, IN 46207 US

New Mailing Address:

FEI Number: 35-2041281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D
Name: SOKOLOV, RICHARD S
Address: 225 W. WASHINGTON ST., PO BOX 7033
City-St-Zip: INDIANAPOLIS, IN 46207

Title: S
Name: BARKLEY, JAMES M
Address: 225 W. WASHINGTON ST., PO BOX 7033
City-St-Zip: INDIANAPOLIS, IN 46207

Title: T
Name: JUSTER, ANDREW C
Address: 225 W. WASHINGTON ST., PO BOX 7033
City-St-Zip: INDIANAPOLIS, IN 46207

Title: C/D
Name: SIMON, DAVID
Address: 225 W. WASHINGTON ST., PO BOX 7033
City-St-Zip: INDIANAPOLIS, IN 46207

Title: ASEC
Name: SCHMIDT, JAMES A
Address: 225 W. WASHINGTON ST., PO BOX 7033
City-St-Zip: INDIANAPOLIS, IN 46207

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES A. SCHMIDT

ASEC

04/12/2010

Electronic Signature of Signing Officer or Director

_____ Date