

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004892

**FILED**  
**Apr 20, 2016**  
**Secretary of State**  
**CC1961557524**

**Entity Name:** THE FINISH LINE, INC. OF INDIANA

**Current Principal Place of Business:**

3308 N. MITTHOEFFER ROAD  
INDIANAPOLIS, IN 46235

**Current Mailing Address:**

3308 N. MITTHOEFFER ROAD  
INDIANAPOLIS, IN 46235 US

**FEI Number: 35-1537210**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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

**Officer/Director Detail :**

Title SVP, SECRETARY  
Name ECK, CHRIS  
Address 3308 N MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR, CHAIRMAN OF THE BOARD OF DIRECTORS  
Name LYON, GLENN S  
Address 3308 N MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title CEO  
Name SATO, SAM  
Address 3308 N MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title CFO  
Name WILHELM, ED  
Address 3308 N MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR  
Name BOONE, TORRENCE  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR  
Name CARMICHAEL, WILLIAM  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR  
Name CRYSTAL, RICHARD  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR  
Name GOLDSMITH, STEPHEN  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

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*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: CHRIS ECK**

**SECRETARY**

**04/20/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name KIRKENDALL, BILL  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR  
Name LANGHAM, CATHERINE  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title VP  
Name GREENWELL, MELISSA  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title DIRECTOR  
Name KUNDA, DOLORES  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title VP  
Name SUTERA, AJ  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235

Title VP, CHEIF OMNICHANNEL OFFICER  
Name JOOMA, IMRAN  
Address 3308 N. MITTHOEFFER ROAD  
City-State-Zip: INDIANAPOLIS IN 46235