

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003122

Entity Name: SENEX SERVICES CORP.**Current Principal Place of Business:**3333 FOUNDERS ROAD
2ND FLOOR
INDIANAPOLIS, IN 46268**Current Mailing Address:**3333 FOUNDERS ROAD
2ND FLOOR
INDIANAPOLIS, IN 46268**FEI Number:** 35-2035698**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT, DIRECTOR
Name RYE, BENJAMIN P
Address 3333 FOUNDERS ROAD, 2ND FLOOR
City-State-Zip: INDIANAPOLIS IN 46268

Title VP, DIRECTOR
Name LOVE, MARCELLOUS
Address 3333 FOUNDERS ROAD, 2ND FLOOR
City-State-Zip: INDIANAPOLIS IN 46268

Title OFFICER, DIRECTOR
Name CAVINS, TIMOTHY J
Address 3333 FOUNDERS ROAD
2ND FLOOR
City-State-Zip: INDIANAPOLIS IN 46268

Title SECRETARY, TREASURER,
DIRECTOR
Name GREVE, GERALD V
Address 3333 FOUNDERS ROAD, 2ND FLOOR
City-State-Zip: INDIANAPOLIS IN 46268

Title DIRECTOR
Name RYE, JONATHAN P
Address 3333 FOUNDERS ROAD, 2ND FLOOR
City-State-Zip: INDIANAPOLIS IN 46268

Title OFFICER, DIRECTOR
Name JOBE, CLAYTON L
Address 3333 FOUNDERS ROAD
2ND FLOOR
City-State-Zip: INDIANAPOLIS IN 46268

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: GERALD V GREVE**TREASURER SECRETARY** 02/04/2016

Electronic Signature of Signing Officer/Director Detail

Date