2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004001

Entity Name: HALL, RENDER, KILLIAN, HEATH & LYMAN, P.C.

CORPORATION

Current Principal Place of Business:

500 NORTH MERIDIAN STREET SUITE 400

INDIANAPOLIS, IN 46204

Current Mailing Address:

500 NORTH MERIDIAN STREET SUITE 400 INDIANAPOLIS, IN 46204 US

FEI Number: 35-1427161 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

C T 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

FILED Apr 20, 2017

Secretary of State

CC9890069353

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

COMMINS, KIMBERLY J. Name Name CUNNINGHAM, NORRIS

Address 201 WEST BIG BEAVER RD. Address 500 N. MERIDIAN ST. COLUMBIA CTR, STE. 315 SUITE 400

City-State-Zip: TROY MI 48084 City-State-Zip: INDIANAPOLIS IN 46204

VΡ Title DIRECTOR Title

Name BAGDADY, BRUCE M. Name SEIDENSTRICKER, PAUL W.

Address 201 WEST BIG BEAVER RD. Address 111 EAST KILLBOURN AVE. COLUMBIA CTR, STE. 315 **SUITE 1300**

TROY MI 48084 MILWAUKEE WI 53202 City-State-Zip: City-State-Zip:

SECRETARY Title Title **PRESIDENT** Name Name

GAUGHAN, MARY C. RYAN, JOHN P.

Address 2800 DEQUINDRE Address 2000 ONE AMERICAN SQ. City-State-Zip: WARREN MI 48092 City-State-Zip: INDIANAPOLIS IN 46282

Title **TREASURER** Title **DIRECTOR**

Name BACHMANN, FRED J. Name HEATH, R. TERRY

500 NORTH MERIDIAN ST. Address 2000 ONE AMERICAN SQ. Address

SUITE 400 INDIANAPOLIS IN 46282 City-State-Zip:

INDIANAPOLIS IN 46204 City-State-Zip:

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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.

04/20/2017 SIGNATURE: FRED J. BACHMANN **TREASURER**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

DIRECTOR

City-State-Zip:

Title

DIRECTOR Title Title DIRECTOR

Name WALLANDER, GREGG M. Name HOGAN, JAMES B.

Address 500 NORTH MERIDIAN ST. Address 500 NORTH MERIDIAN ST.

SUITE 400 SUITE 400

INDIANAPOLIS IN 46204 INDIANAPOLIS IN 46204 City-State-Zip:

Name THOMPSON, WILLIAM H. Name GAUGHAN, MARY C.

Title

DIRECTOR

Address 2800 DEQUINDRE Address 500 NORTH MERIDIAN ST. SUITE 400

City-State-Zip: WARREN MI 48092 INDIANAPOLIS IN 46204 City-State-Zip:

Title DIRECTOR Title **CHAIRMAN**

Name RYAN, JOHN P. Name THOMPSON, WILLIAM H.

500 NORTH MERIDIAN ST. Address Address 2000 ONE AMERICAN SQ. SUITE 400

City-State-Zip: INDIANAPOLIS IN 46282 City-State-Zip: INDIANAPOLIS IN 46204