2024 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 24, 2024

Secretary of State

6159013473CC

Officer/Director Detail:

Title TREASURER Title CHAIRMAN OF THE BOARD

Name BACHMANN, FRED Name THOMPSON, WILLIAM H.

Address 500 NORTH MERIDIAN STREET Address 500 NORTH MERIDIAN STREET

SUITE 400

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

Title DIRECTOR Title SECRETARY

Name SKEELS, JENNIFER Name STELLA, KEVIN

Address 500 NORTH MERIDIAN STREET Address 500 NORTH MERIDIAN STREET

SUITE 400 SUITE 400

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

Title DIRECTOR Title DIRECTOR

Name KAHN, JOSEPH M. Name NOVA, TODD A.

Address 500 NORTH MERIDIAN STREET Address 500 NORTH MERIDIAN STREET

SUITE 400 SUITE 400

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

Title DIRECTOR Title DIRECTOR

Name BETNER, BRIAN C. Name POWERS, COLLEEN

Address 500 NORTH MERIDIAN STREET Address 500 NORTH MERIDIAN STREET

SUITE 400 SUITE 400

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

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SUITE 400

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: FRED BACHMANN TREASURER 04/24/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title VP

Name PRATT, STEVEN Name SKEELS, JENNIFER

Address 500 NORTH MERIDIAN STREET Address 500 NORTH MERIDIAN STREET

SUITE 400 SUITE 400

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

Title PRESIDENT Title DIRECTOR

Name WALLANDER, GREGG Name SUKURS, CHARLES

Address 4041 WASHINGTON BLVD. Address 500 NORTH MERIDIAN STREET

SUITE 400

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