

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10105

Entity Name: BSA LIFESTRUCTURES INC.

Current Principal Place of Business:

9365 COUNSELORS ROW
INDIANAPOLIS, IN 46240

Current Mailing Address:

9365 COUNSELORS ROW
INDIANAPOLIS, IN 46240 US

FEI Number: 35-1323170

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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 SMITH, KEITH H.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title SECRETARY, DIRECTOR
Name SCHOECK, ROBERT P.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title TREASURER, DIRECTOR
Name BISCHOFF, JEFFREY R.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title ASSISTANT TREASURER
Name DUNN, KERRY M.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name DOWNEY, KEVIN L.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name HUOTILAINEN, KALEVI N.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name SELKE, DEREK L.
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name TOKEN, KEVIN
Address 9365 COUNSELORS ROW
City-State-Zip: INDIANAPOLIS IN 46240

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: KERRY M. DUNN

ASSISTANT TREASURER 04/07/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date