

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10105

**Entity Name:** BSA LIFESTRUCTURES INC.

**Current Principal Place of Business:**

9365 COUNSELORS ROW  
SUITE 300  
INDIANAPOLIS, IN 46240

**FILED**  
**Apr 15, 2024**  
**Secretary of State**  
**6976364135CC**

**Current Mailing Address:**

9365 COUNSELORS ROW  
SUITE 300  
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 DIRECTOR  
Name STEFANOVICI, GEORGE  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title CHIEF MARKETING OFFICER  
Name MOORE, BRIAN  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR  
Name LOUGH, ANDREW  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR  
Name JACKSON, SAMUEL P.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title CEO  
Name SPENCE, TIMOTHY J.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title CHIEF DESIGN OFFICER  
Name BOSCHE, TIMOTHY J.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title CFO  
Name PEAVLER, STEPHANIE A.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title PRESIDENT, TREASURER  
Name JACKSON, SAMUEL P.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

**Continues on page 2**

*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:** STEPHANIE A. PEAVLER

**CHIEF FINANCIAL  
OFFICER**

**04/15/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title CHAIRMAN  
Name LIBERATORE, DAVID L.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR  
Name SPENCE, TIMOTHY J.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR  
Name SEEDER, SONYA J.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR  
Name HARRIS, MELANIE  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title VC  
Name POSORSKE, ADAM D.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title COO  
Name WORRELL, J. KENYON  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title SECRETARY  
Name SEEDER, SONYA J.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR  
Name SELKE, DEREK L.  
Address 9365 COUNSELORS ROW  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46240