## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 839877**

FILED Jan 11, 2008 Secretary of State

Entity Name: THE BRAUN CORPORATION OF INDIANA

**Current Principal Place of Business: New Principal Place of Business:** 631 WEST 11TH STREET WINAMAC, IN 46996 **Current Mailing Address: New Mailing Address:** P O BOX 310 WINAMAC, IN 46996 FEI Number: 35-1282638 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECK, KARL 5072 113TH AVENUE NORTH CLEARWATER, FL 33760 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete Title: () Change () Addition BRAUN, RALPH W Name: Name: 631 WEST 11TH STREET Address: Address: City-St-Zip: WINAMAC, IN 46996 City-St-Zip: Title: PD Title: PD () Delete (X) Change ( ) Addition Name: ROTH, WILLIAM R Name: **GUTWEIN. NICK** 631 WEST 11TH STREET 631 WEST 11TH STREET Address: Address: WINAMAC, IN 46996 WINAMAC, IN 46996 City-St-Zip: City-St-Zip: () Delete Title: DV Title: () Change () Addition EASTMAN, THOMAS Name: Name: 631 W 11TH STREET Address: Address: City-St-Zip: WINAMAC, IN 46996 City-St-Zip: ( ) Delete Title: DS Title: DS (X) Change ( ) Addition JOHNSON, BRAD JOHNSTON, BRAD Name: Name: Address: 631 WEST 11TH STREET Address: 631 WEST 11TH STREET City-St-Zip: WINAMAC, IN 46996 City-St-Zip: WINAMAC, IN 46996 Title: Title: () Delete () Change () Addition SCHEFFER, RICHARD L Name: Name: 631 W 11TH STREET Address: Address: City-St-Zip: WINAMAC, IN 46996 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRAD JOHNSTON DS 01/11/2008