

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 841066

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** MANAGEMENT SERVICES OF INDIANA, INC.

**Current Principal Place of Business:**

2868 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

2868 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

**FEI Number:** 37-1010878      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHARLES R. FAUST, JR.  
1408 W. TERRA MAR DRIVE  
POMPANO BEACH, FL 33062 US

**Name and Address of New Registered Agent:**

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:**

**Title:** PD  
**Name:** FAUST, CHARLES R., JR.  
**Address:** 2868 UNIVERSITY DRIVE  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**Title:** S  
**Name:** FAUST, ALICIA  
**Address:** 1408 W. TERRA MAR DR.  
**City-St-Zip:** POMPANO BEACH, FL 33062

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:** CHARLES FAUST

PRES

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date