**DOCUMENT#** 

## FOR PROFIT CORPORATION FORM BUSINESS REPORT (UBR)

FILED
Jun 03, 2002 8:00 am
Secretary of State

05-14-2002 90354 002 \*\*\*150.00

1. Entity Name DO NOT WRITE IN THIS SPACE 90727 2. Principal Place of Business 3. Mailing Address 11711 N. Mecidian St <u>P.O. Box 80238</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Surte 600 City & State City & State 4. FEI Number Applied For ame ndianapolis 35-1588335 Not Applicable Zip Country \$8,75 Additional 5. Certificate of Status Desired いち 46280 7. Name and Address of Current Registered Agent Name Field-Rettere DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE Oak Privie porel Zip Code Jaales 8. 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** Signature, typed or printed name of registered exect and title if anniventies (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Amended UBR is \$61.25 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE TITLE CR2E0348 (12/01) NAME NAME STREET ADDRESS STREET ADDRESS attached CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY.SY.7IP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO-NOT-WRITE CITY-ST-ZIP CITY-ST-ZIP mi IN THIS SPACE NAME KAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-719 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 empreced to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an

of the corporation or the receiver or trustee empowered to execute the attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR

Daytime Phone 8

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8 = 4 F

## OXFORD FINANCIAL GROUP, LTD

Updated List of Names and Addresses for Officers of OFGL As of 1/1/02

Chairman and CEO

Jeffrey H. Thomasson

11711 North Meridian Street

Carmel, IN 46032

President and Chief Operating Officer

Christopher P. LaMothe

11711 North Meridian Street

Garmel, IN=46032-

Executive Vice President and

Chief Financial Officer

Timothy M. Dean

11711 North Meridian Street

Carmel, IN 46032

Executive Vice President and

Chief Investment Officer

Howard W. Harpster

11711 North Meridian Street

Carmel, IN 46032

Executive Vice President and

Chief Strategy Officer

Carole J. Tanner

11711 North Meridian Street

Carmel, IN 46032

Vice President and

Secretary

Michael L. Sears

11711 North Meridian Street

Carmel, IN 46032

Vice President and

Treasurer

-Jeffery-H-Stroman-

11711 North Meridian Street

Carmel, IN 46032

Vice President

Robert L. Schaefer

11711 North Meridian Street

Carmel, IN 46032