

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2008 8:00 am
Secretary of State

01-09-2008 90013 015 ***150.00

DOCUMENT # F04000002954

1. Entity Name
TRI-J INVESTMENTS, INC.



Principal Place of Business
**1908 SCHWIER CT
INDIANAPOLIS, IN 46229**

Mailing Address
~~1908 SCHWIER CT~~
~~INDIANAPOLIS, IN 46229~~
**P.O. Box 1185
CARMEL, IN 46082**



DO NOT WRITE IN THIS SPACE

01022008 No Chg-P CR2E034 (11/05)

4. FEI Number
42-1626760

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BURRELL, ROBERT M
19455 GULF BLVD, STE 9
INDIAN SHORES, FL 33785**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GEORGE, JEFFREY S
STREET ADDRESS	1908 SCHWIER CT P.O. Box 1185
CITY- ST- ZIP	INDIANAPOLIS, IN 46229 Carmel, IN 46082
TITLE	DPST
NAME	GEORGE, DAVID J
STREET ADDRESS	1908 SCHWIER CT
CITY- ST- ZIP	INDIANAPOLIS, IN 46229
TITLE	VP
NAME	GEORGE, DAVID J
STREET ADDRESS	1908 SCHWIER CT
CITY- ST- ZIP	INDIANAPOLIS, IN 46229
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE: David J. George, VP **DAVID J. George, VP 1-2-08 317-894-8758**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #