

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000499

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: CALUMET, INCORPORATED

## Current Principal Place of Business:

2780 WATERFRONT PARKWAY E. DR., STE. 200  
INDIANAPOLIS, IN 46214

## New Principal Place of Business:

## Current Mailing Address:

2780 WATERFRONT PARKWAY E. DR., STE. 200  
INDIANAPOLIS, IN 46214

## New Mailing Address:

FEI Number: 35-1811118

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 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: EVP ( ) Delete  
Name: MOYES, ALLEN  
Address: 3650 W. 141 ST.  
City-St-Zip: WESTFIELD, IN 46074

Title: P ( ) Delete  
Name: GRUBE, BILL  
Address: 6497 DEERFIELD DR.  
City-St-Zip: GREENWOOD, IN 46143

Title: VCFO ( ) Delete  
Name: MURRAY, R. PATRICK II  
Address: 8970 SHELburne WAY  
City-St-Zip: ZIONSVILLE, IN 46077

Title: V ( ) Delete  
Name: ANDERSON, BILL  
Address: 8642 BLACK STONE CROSSING  
City-St-Zip: AVON, IN 46123

Title: V ( ) Delete  
Name: MILLS, ROBERT  
Address: P.O. BOX 5745  
City-St-Zip: SHREVEPORT, LA 71135

Title: V ( ) Delete  
Name: STRAUMINS, JENNIFER  
Address: 2838 SHADWELL PLACE  
City-St-Zip: GREENWOOD, IN 46143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: R. PATRICK MURRAY, II

VCFO

03/28/2008

Electronic Signature of Signing Officer or Director

Date