FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State

DOCUMENT # F94000001824 1. Entity Name					05-08-2002 90148 049 ***150.00	
I	Herff Jones, Inc.					
	DO NOT WRIT	E IN THIS S	PAC	Œ		
2. Principal Place of Business 4501 West 62nd Street Suite, Apt. #, etc.		3. Mailing Address 4501 West 62nd Street Suite, Apt. #, etc.		DO NOT WRITE IN	N THIS SPACE	
City & Sta Indian Zip	napolis, IN 46268 Country	City & State Indianapolis Zip	, IN		4. FE! Number 35-1637714 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional
					7. Name and Address of Current Reg	Fee Required
	DO NOT W IN THIS SI	100 page 200 page 20		Street Address*(I	rporation System P.O. Box, Number is Not Acceptable) West Broward Blvd.	-
				City	ation	FL Zip Code 33324
SIGNATURE 9. This corpo Tax filing r	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangibla requirement and elects to do so, ria on back)	e January 1 N After May Amende	E: Registered lay 1 Fo 1, Fee Ji d UBR Is	Agent signature required: 9: Is \$150,00 9: \$550.00 9: \$61.25	10. Election Campaign Financia	DATE
11.	OFFICERS AND	Make Check Payat DIRECTORS	не го ре	partment of State	C .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD James W. Hubbard 4501 West 62nd Street Indianapolis,IN 46268			T ADDRESS St. BP		A CONTRACTOR AND A CONT
NAME STREET ADDRESS CITY-ST-ZIP	PD Robert S. Potts 4501 West 62nd Street Indianapolis, IN 46268			FADURESS St. 2/P		1200
ITLE AME TREET ADDRESS ITY-ST-ZIP	VD Lawrence F. Fehr 4501 West 62nd Street Indianapolis, IN 46268			Address T: Zip	DO NOT W	RITE
ITLE Ame Treet adoress Ty-st-zip	S Michael J. Cheek 4501 West 62nd Street Indianapolism IN 46268			ADDRESS 1-ZIP	IN THIS SP	ACE
ile Ime Reet address IY-ST-ZIP	T Michael S. Parrett 4501 West 62nd Street Indianapolis, IN 46268			ADDRESS:		
TLE ME REET ADDRESS FY-ST-ZIP	VD Joesphak. Slaughter 4501 West 62nd Street Indianapolis IN 46268			ADDRESS : - Zip		
 I hereby ce indicated or the corporal attachment 	ertify that the information supplied with in this report or supplemental report is oration or the receiver or fustee empirically with an address with all other like em	this filing does not qualify for t true and accurate and that my owered to execute this report powered.		otion stated in Section stated	on 119.07(3)(i), Florida Statutes, I furthe ne legal effect as if made under oath; it Florida Statutes; and that my name ap	r certify that the information lat I am an officer or director pears in Block 11 or on an