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FILED
Apr 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000001618 (6)

1. Corporation Name
IMS EVENTS, INC.



Principal Place of Business
4790 WEST 16TH STREET
INDIANAPOLIS IN 46222

Mailing Address
4790 WEST 16TH STREET
INDIANAPOLIS IN 46222-2550

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

04/04/1995

3a. Date of Last Report

01/26/1996

4. FEI Number

35-1943070

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME GEORGE, ANTON H
STREET ADDRESS 4790 WEST 16TH STREET
CITY-ST-ZIP INDIANAPOLIS IN 46222

TITLE PD ☐ DELETE

NAME DONALDSON, WILLIAM R
STREET ADDRESS 4790 WEST 16TH STREET
CITY-ST-ZIP INDIANAPOLIS IN 46222

TITLE SD ☐ DELETE

NAME BRIGHTON, W. CURTIS
STREET ADDRESS 4790 WEST 16TH STREET
CITY-ST-ZIP INDIANAPOLIS IN 46222

TITLE VDT ☐ DELETE

NAME BELSKUS, JEFFREY G
STREET ADDRESS 4790 WEST 16TH STREET
CITY-ST-ZIP INDIANAPOLIS IN 46222

TITLE V ☐ DELETE

NAME FORBES, KEVIN
STREET ADDRESS 4790 WEST 16TH STREET
CITY-ST-ZIP INDIANAPOLIS IN 46222

TITLE D ☐ DELETE

NAME SNYDER, JACK R
STREET ADDRESS ONE AMERICAN SQUARE, BOX 82001
CITY-ST-ZIP INDIANAPOLIS IN 46282

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jeffrey G. Belskus

3/15/97

317-484-6730

CR2E034 (9/96)