PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
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DOCUMENT # F95000001618

1. Corporation Name

IMS Events, Inc.

REINSTATEMENT 05-06

2. Principal Office Address	3. Mailing Office Address
4790 West 16th Street	same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Indianapolis, Indiana 46222	City & State
Zip: 46216 Country: United States	Zip Country

4. Date Incorporated or Qualified To Do Business In Florida: April 4, 1995

5. FEI Number: 35-1943070 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road

Suite, Apt. #, Etc.

City: Plantation State: FL Zip Code: 33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Robert S. Lane Assistant Secretary
REGISTERED AGENT MUST SIGN

Date: September 21st, 2006

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Mrs.	Mari H. George, director	4790 W. 16th Street	Indianapolis, Indiana 46222
Mr.	Anton H. George, director and president	4790 W. 16th Street	Indianapolis, Indiana 46222
Mr.	Jeffrey G. Belskus, director, VP, treasurer	4790 W. 16th Street	Indianapolis, Indiana 46222
Mr.	W. Curtis Brighton, director and secretary	4790 W. 16th Street	Indianapolis, Indiana 46222
Mr.	Jack R. Snyder, director	4790 W. 16th Street	Indianapolis, Indiana 46222
Mr.	Kevin Forbes, vice president	4790 W. 16th Street	Indianapolis, Indiana 46222

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: W. Curtis Brighton, Secretary — September 18, 2006 — (317) 492-6720
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLEID - 01/04/2006 CT System Online

B. Mitchell SEP 22 2006

Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

IMS EVENTS, INC.

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