

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000004745

1. Entity Name

MILLER PIPELINE CORPORATION

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90296 034 ***150.00

Principal Place of Business

Mailing Address

8850 CRAWFORDVILLE RD
INDIANAPOLIS IN 46234

PO BOX 34141
INDIANAPOLIS IN 46234-0141

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 35-1959522

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

City FL Zip Code

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.

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
MILLER, DON
8850 CRAWFORDVILLE RD
INDIANAPOLIS IN 46234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COOP
MILLER, DALE R
8850 CRAWFORDVILLE RD
INDIANAPOLIS IN 46234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COO ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
BANNING, DOUGLAS S JR
8850 CRAWFORDVILLE RD
INDIANAPOLIS IN 46234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MORRIS, JAMES T
1220 WATERWAY BLVD
INDIANAPOLIS IN 46202 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROSENFELD, J. A.
1220 WATERWAY BLVD
INDIANAPOLIS IN 46202 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Watters, David D.
8850 Crawfordville Rd
Indianapolis, IN 46234 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BROYLES, JOSEPH R
1220 WATERWAY BLVD
INDIANAPOLIS IN 46202 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/00
Date

317/293-0278
Daytime Phone #