


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 24, 2004 8:00 am**  
**Secretary of State**

02-24-2004 90008 046 \*\*\*150.00

<b>DOCUMENT # F95000005614</b>			
1. Entity Name <b>KELLEY INDIANA, INC.</b>			
Principal Place of Business <b>36 S. PENNSYLVANIA STREET #550 INDIANAPOLIS IN 46204 US</b>		Mailing Address <b>36 S. PENNSYLVANIA STREET #550 INDIANAPOLIS IN 46204 US</b>	
2. Principal Place of Business <b>32 East Washington St. Suite 1650</b>		3. Mailing Address <b>SAME</b>	
City & State <b>INDIANAPOLIS</b>		City & State <b>IN</b>	
Zip <b>46204</b>	Country	Zip	Country
6. Name and Address of Current Registered Agent <b>KELLEY, E.W. 131 WOODEN WAY SE WINTER HAVEN FL 33884</b>		7. Name and Address of New Registered Agent Name: Street Address (P.O. Box Number is Not Acceptable): City: <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KELLEY, E.W. 36 S. PENNSYLVANIA ST., STE 550 INDIANAPOLIS IN 46204 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KELLEY, W.L. 4020 WATERFORD DRIVE CHARLOTTE NC 28226 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KELLEY, W.E. 36 S. PENNSYLVANIA ST., STE 550 INDIANAPOLIS IN 46204 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VM KELLEY, CHRIS M 6085 W 550N SHARPSVILLE IN 46068 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAST ARAMIAN, S.S. 14 SUTTON PLACE SOUTH NEW YORK NY 10022 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLEY, E.W. II 2780 VIRGINIA AVE UNIT 307 WASHINGTON DC 20037 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition



MOORE CR2E034 (11/03)

4. FEI Number <b>35-1164047</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *E.W. Kelley II*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*attachment*

February 17, 2004

# F9500005614  
54010155-

Kelley Indiana, Inc.  
32 East Washington St.  
Suite 1650  
Indianapolis, IN 46204

Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL 32314

Please change our address and also listed below are our Officers and Directors

E. W. Kelley II  
President  
2700 Virginia Avenue  
Unit 307  
Washington, DC 20037

Wayne L. Kelley  
Vice President, Director  
4020 Waterford Drive  
Charlotte, NC 28226

Wilma E. Kelley  
Secretary/Treasurer, Director  
32 East Washington St.  
Suite 1650  
Indianapolis, IN 46204

Chris M. Kelley  
Vice President/Manager  
6085 W 550 N  
Sharpsville, IN 46068

Carol Stoner  
Assistant Secretary/Treasurer  
32 East Washington St.  
Suite 1650  
Indianapolis, IN 46204

Thank you for taking care of this matter.



E. W. Kelley II  
President