

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006670

1. Entity Name

R.W. ARMSTRONG & ASSOCIATES, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90462 040 \*\*\*158.75

Principal Place of Business

Mailing Address

2801 S. PENNSYLVANIA STREET  
 INDIANAPOLIS IN 46225

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 INDIANAPOLIS IN 46225

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

35-1062227

Applied For

Not Applicable

Zip

Country

Zip

Country

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

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

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 Jeffrey Graves, Asst. Secretary

4/27/2000

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 ☐ Delete  
 NAME P  
 STREET ADDRESS WADE, JAMES A  
 CITY-ST-ZIP 6359 CHERBOURG DRIVE  
 INDIANAPOLIS IN 46220

TITLE ☐ Change ☒ Addition  
 NAME V  
 STREET ADDRESS WADE, JOSEPH D  
 CITY-ST-ZIP 11414 KAYAK DRIVE  
 INDIANAPOLIS IN 46236

TITLE ☐ Delete  
 NAME ST  
 STREET ADDRESS FLORA, JAMES J JR.  
 CITY-ST-ZIP 922 PAWNEE DRIVE  
 CROWN POINT IN 46307

TITLE ☐ Change ☒ Addition  
 NAME V  
 STREET ADDRESS SALMAN, ROLAND T  
 CITY-ST-ZIP 12471 DOE LANE  
 INDIANAPOLIS IN 46236

TITLE ☐ Delete  
 NAME V  
 STREET ADDRESS BOSCHENKO, ANATOLI  
 CITY-ST-ZIP 4723 STANSBURY LANE  
 INDIANAPOLIS IN 46254

TITLE ☐ Change ☒ Addition  
 NAME V  
 STREET ADDRESS RAINIER, TERRY L  
 CITY-ST-ZIP 5520 LINCOLN ROAD  
 MARTINSVILLE IN 46151

TITLE ☐ Delete  
 NAME V  
 STREET ADDRESS FULKERSON, ROGER D  
 CITY-ST-ZIP 7711 MARADONA DRIVE S.  
 INDIANAPOLIS IN 46214

TITLE ☐ Change ☒ Addition  
 NAME V  
 STREET ADDRESS SCHALK, SUSAN M  
 CITY-ST-ZIP 545 E VERMONT STREET  
 INDIANAPOLIS IN 46202

TITLE ☒ Delete  
 NAME V  
 STREET ADDRESS JACKSON, GORDON D  
 CITY-ST-ZIP 1208 MILE POST DR.  
 DUNWOODY GA 30338

TITLE ☐ Change ☒ Addition  
 NAME V  
 STREET ADDRESS LOEFFLER, FRED M  
 CITY-ST-ZIP 2298 MARINA COURT  
 GREENWOOD IN 46143

TITLE ☐ Delete  
 NAME V  
 STREET ADDRESS JONES, DEXTER A  
 CITY-ST-ZIP 1953 KENNARD DRIVE  
 SNELLVILLE GA 30278

TITLE ☐ Change ☒ Addition  
 NAME V  
 STREET ADDRESS SCHULTHEIS, TODD A  
 CITY-ST-ZIP 7130 TARRAGON COURT  
 INDIANAPOLIS IN 46237

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:

Fred M Loeffler FRED M LOEFFLER

4/26/00

(317) 786-0461

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)