

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Mar 06, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # F99000006670**1. Entity Name  
R.W. ARMSTRONG & ASSOCIATES, INC.

## Principal Place of Business

2801 S. PENNSYLVANIA STREET

INDIANAPOLIS

46225

IN

## Mailing Address

2801 S. PENNSYLVANIA STREET

INDIANAPOLIS

46225

IN

## 2. Principal Place of Business

## 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

## 4. FEI Number

35-1062227

Applied For

Not Applicable

## 5. Certificate of Status Desired

☒**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION

33324

FL

US

## 7. Name and Address of New Registered Agent

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)

03/06/2001

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, 2001 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	V	<input type="checkbox"/> Delete
NAME	JONES DEXTER A	
STREET ADDRESS	1953 KENNARD DRIVE	
CITY-ST-ZIP	SNELLVILLE GA 30278	
TITLE	V	<input type="checkbox"/> Delete
NAME	WADE JOSEPH D	
STREET ADDRESS	11414 KAYAK DR	
CITY-ST-ZIP	INDIANAPOLIS IN 46236	
TITLE	V	<input type="checkbox"/> Delete
NAME	FULKERSON ROGER D	
STREET ADDRESS	7711 MARADONA DRIVE S.	
CITY-ST-ZIP	INDIANAPOLIS IN 46214	
TITLE	V	<input type="checkbox"/> Delete
NAME	BOSCHENKO ANATOLI	
STREET ADDRESS	4723 STANSBURY LANE	
CITY-ST-ZIP	INDIANAPOLIS IN 46254	
TITLE	ST	<input type="checkbox"/> Delete
NAME	FLORA JAMES JJR.	
STREET ADDRESS	922 PAWNEE DRIVE	
CITY-ST-ZIP	CROWN POINT IN 46307	
TITLE	P	<input type="checkbox"/> Delete
NAME	WADE JAMES A	
STREET ADDRESS	6359 CHERBOURG DRIVE	
CITY-ST-ZIP	INDIANAPOLIS IN 46220	

TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES DEXTER A	
STREET ADDRESS	1770 INDIANA TRAIL ROAD SUITE 430	
CITY-ST-ZIP	NORCROSS GA 30093	
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WADE JOSEPH D	
STREET ADDRESS	2801 S PENNSYLVANIA STREET	
CITY-ST-ZIP	INDIANAPOLIS IN 46225	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALMAN ROLAND T	
STREET ADDRESS	2801 S PENNSYLVANIA STREET	
CITY-ST-ZIP	INDIANAPOLIS IN 46225	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOSCHENKO ANATOLI	
STREET ADDRESS	2801 S PENNSYLVANIA STREET	
CITY-ST-ZIP	INDIANAPOLIS IN 46225	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLORA JAMES JJR.	
STREET ADDRESS	8300 BROADWAY SUITE E1	
CITY-ST-ZIP	MERRILLVILLE IN 46410	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WADE JAMES A	
STREET ADDRESS	2801 S PENNSYLVANIA STREET	
CITY-ST-ZIP	INDIANAPOLIS IN 46225	

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: JAMES A WADE**

P

03/06/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

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**TODD A SCHULTHEIS, VICE PRESIDENT**  
**2801 S PENNSYLVANIA STREET**

**INDIANAPOLIS, IN 46225**

**FRED M LOEFFLER, VICE PRESIDENT**  
**2801 S PENNSYLVANIA STREET**

**INDIANAPOLIS, IN 46225**

**TERRY L RAINIER, VICE PRESIDENT**  
**2801 S PENNSYLVANIA STREET**

**INDIANAPOLIS, IN 46225**