

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005307

Entity Name: PHI TAU, INC.

FILED  
Jun 02, 2005  
Secretary of State

## Current Principal Place of Business:

8815 WESLEYAN ROAD  
INDIANAPOLIS, IN 46268

## New Principal Place of Business:

## Current Mailing Address:

8815 WESLEYAN ROAD  
INDIANAPOLIS, IN 46268

## New Mailing Address:

FEI Number: 59-3616665      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SCHWARTZ, BARRY  
Address: 701 BRICKELL KEY BLVD, #2303  
City-St-Zip: MIAMI, FL 33131

Title: PD ( ) Delete  
Name: COHON, PHILIP H  
Address: 30 BEEKMAN PLACE, #7-C  
City-St-Zip: NEW YORK, NY 10022

Title: DS ( ) Delete  
Name: DUNN, SIDNEY N  
Address: 8815 WESLEYAN ROAD  
City-St-Zip: INDIANAPOLIS, IN 46268

Title: D ( ) Delete  
Name: ARONIN, PAUL  
Address: 1221 WOOD HOLLOW LN  
City-St-Zip: MARIETTA, GA 30067

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: COHEN, PHILIP H  
Address: 30 BEEKMAN PLACE, #7-C  
City-St-Zip: NEW YORK, NY 10022

Title: DS (X) Change ( ) Addition  
Name: HOLUB, MICHAEL R  
Address: 8815 WESLEYAN ROAD  
City-St-Zip: INDIANAPOLIS, IN 46268

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: KATZ, MARC P  
Address: 8910 PURDUE ROAD, SUITE 480  
City-St-Zip: INDIANAPOLIS, IN 46268

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARC P. KATZ

D

06/02/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date