FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 18 PM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P11724** **(2)**

1. Corporation Name
GARCO EQUITY SALES, INC.

Principal Place of Business	Mailing Address
11815 NORTH PENNSYLVANIA STREET CARMEL IN 46032	11815 NORTH PENNSYLVANIA STREET CARMEL IN 46032

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
10/08/1986	04/28/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

4. FEI Number **75-1301573** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SCHEIDERMAN, GEORGE R
1203 GOVERNOR'S SQUARE BLVD
SUITE 307
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VTD	11 TITLE	SVP, Treasurer	☒ Change ☐ Addition
NAME	ADAMS, JAMES S.	12 NAME		
STREET ADDRESS	11815 N PENNSYLVANIA ST	13 STREET ADDRESS		
CITY-ST-ZIP	CARMEL IN	14 CITY-ST-ZIP		
TITLE	PD	21 TITLE	President	☒ Change ☐ Addition
NAME	TYSON, LYNN C	22 NAME		
STREET ADDRESS	11815 N PENNSYLVANIA ST.	23 STREET ADDRESS		
CITY-ST-ZIP	CARMEL IN 46032	24 CITY-ST-ZIP		
TITLE	VSD	31 TITLE	VP, Sr. Counsel & Secretary	☒ Change ☐ Addition
NAME	LATIMER, WILLIAM P	32 NAME		
STREET ADDRESS	11815 N PENNSYLVANIA ST.	33 STREET ADDRESS		
CITY-ST-ZIP	CARMEL IN 46032	34 CITY-ST-ZIP		
TITLE	V	41 TITLE	SVP, Corporate Taxes	☒ Change ☐ Addition
NAME	DEVANNEY, WILLIAM T JR	42 NAME		
STREET ADDRESS	11815 N PENNSYLVANIA ST.	43 STREET ADDRESS		
CITY-ST-ZIP	CARMEL IN 46032	44 CITY-ST-ZIP		
TITLE	V	51 TITLE	Second VP, Admin	☒ Change ☐ Addition
NAME	BARNARD, PATRICIA	52 NAME		
STREET ADDRESS	11815 N PENNSYLVANIA ST.	53 STREET ADDRESS		
CITY-ST-ZIP	CARMEL IN 46032	54 CITY-ST-ZIP		
TITLE	AS	61 TITLE	VP, Financial Reporting	☒ Change ☐ Addition
NAME	RADEZ, WILLIAM R., JR.	62 NAME	Barra, David J.	
STREET ADDRESS	11815 N PENNSYLVANIA ST.	63 STREET ADDRESS	11815 N. Pennsylvania Street	
CITY-ST-ZIP	CARMEL IN	64 CITY-ST-ZIP	Carmel, Indiana 46032	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 with changes, or on an attachment with an address.

SIGNATURE: William T. Devanney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William T. Devanney, Jr. 4/11/95 317-817-3754
Date Daytime Phone #

941284Z1 FP