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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P20203

(6)

1. Corporation Name

THE SKILLMAN CORPORATION

Principal Place of Business

3834 SOUTH EMERSON AVE.
INDIANAPOLIS IN 46203

Mailing Address

3834 SOUTH EMERSON AVE.
INDIANAPOLIS IN 46203-5823

3. Date Incorporated or Qualified
07/25/1988

3a. Date of Last Report
06/12/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION FL 33324

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

Signature of the registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SKILLMAN, HAROLD A.
STREET ADDRESS 8158 DEAN RD
CITY-ST-ZIP INDIANAPOLIS IN

TITLE V
NAME KOENES, LARRY
STREET ADDRESS 1873 ARCHIES CT
CITY-ST-ZIP FRANKLIN IN

TITLE ST
NAME TAPP, MICHAEL J
STREET ADDRESS 235 BACK CREEK CIR.
CITY-ST-ZIP GREENWOOD IN

TITLE V
NAME DAVIS, CHARLES F.
STREET ADDRESS 1051 COUNTRY LANE RD.
CITY-ST-ZIP GREENFIELD IN

TITLE VD
NAME SKILLMAN, BARBARA J.
STREET ADDRESS 8158 DEAN RD
CITY-ST-ZIP INDIANAPOLIS IN

TITLE V
NAME FINDLEY, JACK E.
STREET ADDRESS 6691 W 100 S
CITY-ST-ZIP NEW PALESTINE IN

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 if changed, or on an attachment with an address.

SIGNATURE

MICHAEL J. TAPP

4/10/97

317-783-6151

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0479432

CR2E034 (9/96)