

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0026113

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 APR 19 AM 11:01

DOCUMENT # P20806

1. Corporation Name
ETS, INC. OF INDIANA

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business: 6270 CORPORATE DRIVE INDIANAPOLIS IN 46278

Mailing Address: 6270 CORPORATE DRIVE INDIANAPOLIS IN 46278

2. Principal Place of Business: 21, 22, 23, 24, 25

2a. Mailing Address: 26, 27, 28, 29, 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/08/1988

4. FID Number: 36-3449215

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. Has corporation owed the current year Intangible Personal Property Tax: [] Yes [] No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
MULLIS, HAROLD W JR, ESQ
101 E. KENNEDY BLVD.
SUITE 2800
TAMPA FL 33602

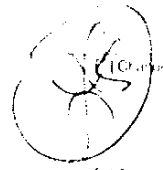
81 Name: LEXIS DOCUMENT SERVICES
82 Street Address (P.O. Box Numbers Not Acceptable): 3453 W. W. KELLEY ROAD
83
84 City: TALLAHASSEE FL 85 Zip Code: 32311

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. Thereby accepting the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: By: Rebecca Hensler, Asst Secretary
Date: 4/16/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	11 TITLE	
NAME	GRAY, TREVOR	12 NAME	
STREET ADDRESS	6270 CORPORATE DRIVE	13 STREET ADDRESS	
CITY-ST-ZIP	INDIANAPOLIS IN 46278	14 CITY-ST-ZIP	
TITLE	VTD	21 TITLE	
NAME	GRAY, EDNA	22 NAME	
STREET ADDRESS	6270 CORPORATE DR.	23 STREET ADDRESS	
CITY-ST-ZIP	INDIANAPOLIS IN 46278	24 CITY-ST-ZIP	
TITLE	V	31 TITLE	
NAME	BELL, RICHARD A	32 NAME	
STREET ADDRESS	1050 CEDAR RIDGE DR.	33 STREET ADDRESS	
CITY-ST-ZIP	PLAINFIELD IN 46168	34 CITY-ST-ZIP	
TITLE	V	41 TITLE	
NAME	ALBRIGHT, RONALD	42 NAME	
STREET ADDRESS	1810 E. SHORE DR.	43 STREET ADDRESS	
CITY-ST-ZIP	MARTINSVILLE IN 46151	44 CITY-ST-ZIP	
TITLE	V	51 TITLE	
NAME	HARTLIEB, LESLIE	52 NAME	
STREET ADDRESS	6270 CORPORATE DRIVE	53 STREET ADDRESS	
CITY-ST-ZIP	INDIANAPOLIS IN 46278	54 CITY-ST-ZIP	
TITLE	VP	61 TITLE	
NAME	WILLIAM PIPP	62 NAME	
STREET ADDRESS	6270 CORPORATE DR	63 STREET ADDRESS	
CITY-ST-ZIP	INDIANAPOLIS IN 46278	64 CITY-ST-ZIP	

500002853485--2
-04/27/99--01067--012
****150.00 ****150.00



14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered.

SIGNATURE: Richard A. Bell 4/13/99 (317) 240-8882

CR2E034 (11/98)