

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24463

FILED  
Feb 22, 2005  
Secretary of State

Entity Name: MELVIN SIMON & ASSOCIATES, INC.

**Current Principal Place of Business:**

115 WEST WASHINGTON STREET  
SUITE 15E  
INDIANAPOLIS, IN 46204 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7066  
TAX DEPT.  
INDIANAPOLIS, IN 46207 US

**New Mailing Address:**

% CORPORATE PARALEGAL  
115 W. WASHINGTON ST., SUITE 15E  
INDIANAPOLIS, IN 46204 US

FEI Number: 35-1093882

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: SIMON, HERBERT  
Address: 115 W. WASHINGTON STREET  
City-St-Zip: INDIANAPOLIS, IN 46204

Title: P ( ) Delete  
Name: SIMON, STEPHEN  
Address: 115 W. WASHINGTON STREET  
City-St-Zip: INDIANAPOLIS, IN 46204

Title: VPAS ( ) Delete  
Name: SIMON, DAVID E  
Address: 115 W. WASHINGTON STREET  
City-St-Zip: INDIANPOLIS, IN 46204

Title: VS ( ) Delete  
Name: FOXWORTHY, RANDOLPH L  
Address: 115 W. WASHINGTON STREET  
City-St-Zip: CARMEL, IN

Title: T ( ) Delete  
Name: FELSHER, ARTHUR  
Address: 115 W. WASHINGTON STREET  
City-St-Zip: INDIANAPOLIS, IN 46204

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

Title: AS ( ) Change (X) Addition  
Name: SCHMIDT, JAMES A  
Address: 115 W. WASHINGTON STREET  
City-St-Zip: INDIANAPOLIS, IN 46204

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES A. SCHMIDT

AS

02/22/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date