FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P26073 (7)

1. Corporation Name
MAREMONT CORPORATION

Principal Place of Business
1209 ORANGE STREET
WILMINGTON DE 19801
US

Mailing Address
ONE NOBLITT PLAZA
BOX 3000
COLUMBUS IN 47202
US

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 09/18/1989
3a. Date of Last Report: 03/03/1995
4. FEI Number: 13-2986138 ☐ 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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 ______

12. OFFICERS AND DIRECTORS

TITLE	PCD	☐ DELETE
NAME	POND, BYRON O.	
STREET ADDRESS	5151 WOODBRIAR CT	
CITY-ST-ZIP	COLUMBUS IN 47201	
TITLE	S	☐ DELETE
NAME	GROGG, TIM A	
STREET ADDRESS	1302 AUDUBON	
CITY-ST-ZIP	COLUMBUS IN	
TITLE	VD	☐ DELETE
NAME	HUNT, V. WILLIAM	
STREET ADDRESS	9622 W. SHORE DRIVE	
CITY-ST-ZIP	COLUMBUS IN 47201	
TITLE	D	☐ DELETE
NAME	BAKER, JAMES K.	
STREET ADDRESS	12044 W. SR 46	
CITY-ST-ZIP	COLUMBUS IN 47201	
TITLE	T	☐ DELETE
NAME	SALES, A R	
STREET ADDRESS	865 BAYWOOD COURT	
CITY-ST-ZIP	COLUMBUS IN 47201	
TITLE	CTO	☐ DELETE
NAME	LOWE, WILLIAM M.	
STREET ADDRESS	4843 TIMBER RIDGE	
CITY-ST-ZIP	COLUMBUS IN	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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)(k), 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: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 16, 1996
Date

812-379-3000
Daytime Phone #

CR2E034 (12/95)