

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P31513** (5)

1. Corporation Name

BROWNING DAY MULLINS DIERDORF INC



Principal Place of Business

Mailing Address

**334 NORTH SENATE AVE.
INDIANAPOLIS IN 46204**

**334 NORTH SENATE AVE.
INDIANAPOLIS IN 46204**

3. Date Incorporated or Qualified

10/24/1990

3a. Date of Last Report

08/25/1995

4. FEI Number

35-1182593

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

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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 person who is authorized to sign this statement on behalf of the corporation.

(NOTE: This must be a printed signature enclosed within a circle.)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **C** ☒ DELETE
NAME **BROWNING, JAMES E.**
STREET ADDRESS **1061 KILLWOOD COURT**
CITY-STATE-ZIP **INDIANAPOLIS IN**

TITLE **P** ☐ DELETE
NAME **MULLINS, CRAIG W.**
STREET ADDRESS **11006 BRIGANTINE DR.**
CITY-STATE-ZIP **INDIANAPOLIS IN**

TITLE **V** ☐ DELETE
NAME **DIERDORF, JOHN M.**
STREET ADDRESS **12225 WAYSIDE ROAD**
CITY-STATE-ZIP **INDIANAPOLIS IN**

TITLE **V** ☐ DELETE
NAME **HESS, JONATHAN R.**
STREET ADDRESS **29 W. 49TH**
CITY-STATE-ZIP **INDIANAPOLIS IN**

TITLE **S** ☒ DELETE
NAME **DAY, D. ALAN**
STREET ADDRESS **5378 WISPERWOOD DR.**
CITY-STATE-ZIP **INDIANAPOLIS IN**

TITLE **T** ☐ DELETE
NAME **LYNCH, MARTIN W.**
STREET ADDRESS **11014 E. TENACIOUS DR.**
CITY-STATE-ZIP **INDIANAPOLIS IN**

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-STATE-ZIP

VP

Joseph Gregory E
7457 PARK AVE
INDY IN 46240

VP

Robinson, Steven W.
6160 PRIMROSE AVE
INDY IN 46220
Exec VP

Exec VP / sec

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin W Lynch *Martin W Lynch* **6-6-96 3176359747 (336)**

CR2E034 (3/96)