FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

May 05, 2003 8:00 am Secretary of State

			/ * ,		05-05-2003 90109 008 ***150.	.00
DOCU 1. Enlity Nar	JMENT # P31739					
PERFORMANCE MATTERS ASSOCIATES, INC.					••••••	
	DO NOT WRITE	IN THIS S	PAC			
2. Principal Place of Business 3. Mailing Address 6116 N. CENTRAL EXPRESSWAY 11815 N. PE			MNOVI VANIA OT]	
Suite, Apt. #, etc.		11815 N. PENNSYLVANIA ST. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State DALLAS, TX		City & State CARMEL, IN			4. FEI Number 75-2334840 Applie Not Ap	ed For pplicable
^{Zip} 75206	Country	Zip 46032	Coun		5. Certificate of Status Desired \$8.75 Addition Fee Required	nal
					7. Name and Address of Current Registered Agent	
				Name CT C	ORPORATION SYSTEM	
	DO NOT W			Street Address ((P.O. Box Number is Not Acceptable)	
IN THIS SPACE				1200 SOUT	TH PINE ISLAND RD.	
				City PLANTA	ATION , FL Zip Code 33324	,
Make Check	Signature, lyped or printed name of registered agent at muary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 k Payable to Florida Department of \$	State	E: Registered	d Agent vignalnite required	9. Election Campaign Financing \$5.00 M Trust Fund Contribution.	
10.	OFFICERS AND D	DIRECTORS	- Convers			in the control
NAME STREET ADDRESS CHY-ST-ZIP	PD CHRISTOPHER L WE 6116 N. CENTRAL EXPRES DALLAS, TX 75206		NAME STREE	T ADDRESS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP WILLIAM T. DEVANN 11815 N. PENNSYLVANIA CARMEL, IN 46032	•		Telefish Transfer and American		
NAME STREET ADDRESS CITY-ST-ZIP	AS KARL W. KINDIG 11815 N. PENNSYLVANIA CARMEL, IN 46032	ST.	40.00		DO NOT WRITE	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	SVPT DANIEL J. MURPHY 11815 N. PENNSYLVANIA CARMEL, IN 46032		name Stree	T ADDRESS- ST-ZIP	IN THIS SPACE	
TIFLE NAME STREET ADDRESS CITY+ST-ZIP	VPD ANDREI RADIVOYEV 6116 N. CENTRAL EXPRE DALLAS, TX 75206		The Later	and the same of the same of		
TITLE NAME STREET ADDRESS	D WILLIAM J. SHEA 11815 N. PENNSYLVANIA CARMEL IN 46032	ST.	NAME	T ADDRESS		

12. I hereby cortify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules, I further certify that the information indicated on this report or supplemental 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 Statules; and that my name appears in Block 10 or on an attachment with an additions, with all otherwise empowered.

SIGNATURE: 4

SIGNATURE AND TYPED OR POWIED NAME OF SIGNING OFFICER OR DIRECTOR

WILLILAM T. DEVANNEY, JR. 4/28/03

317-817-6000

CR2E034B (12/02)