


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000066489		
1. Entity Name FISHERS INDIANA WAREHOUSE INC.		
Principal Place of Business	Mailing Address	
1801 HERMITAGE BLVD STE 600 TALLAHASSEE, FL 32308 US	1801 HERMITAGE BLVD STE 600 TALLAHASSEE, FL 32308 US	



01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-2513731	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DAVID E. TODD 1801 HERMITAGE BLVD. STE 100 TALLAHASSEE, FL 32308	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, DOUGLAS W 1801 HERMITAGE BLVD STE 600 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS SMITH, JEFFREY L 1801 HERMITAGE BLVD STE 600 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTAS WEAVER, REGINA 8750 N CENTRAL PKWY SUITE 800 DALLAS, TX 75231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, G. A 8750 N. CENTRAL EXPWY STE 800 DALLAS, TX 752316437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS FARALDO, MARK P 8750 N CENTRAL EXPRESSWAY #800 DALLAS, TX 75231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAT GRAY, LYNNE M 1801 HERMITAGE BLVD SUITE 600 DALLAS, TX 75231

1100000208955
02/02/05-80015-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. 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 Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark P. Faraldo *Mark P. Faraldo* 1/25/05 2149890800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #