

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 # P94000059660 (8)

1. Corporation Name

TCI MANAGEMENT CO.

Principal Place of Business

400 E. SOUTHPORT RD.  
SUITE 120  
INDIANAPOLIS IN 46237  
US

Mailing Address

400 E. SOUTH PORT RD  
STE. 120  
INDIANAPOLIS IN 46237  
US



2. Principal Place of Business

21 4000 E. SOUTHPORT RD.

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 4000 E. SOUTHPORT RD.

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/12/1994

3a. Date of Last Report

01/20/1995

4. FEI Number

59-3263008

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

ULRICH, ROBERT L  
100 SECOND AVE S 12TH FLOOR  
ST PETERSBURG FL 33701

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

215 26TH AVE. N.

83

84 City

FL

85 Zip Code

33704

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 typed for printed name of registered agent as filed applicable

(NOTE: Registered Agent's signature is required when resubmitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME ULRICH, ROBERT L  
STREET ADDRESS 215 26TH AVE N  
CITY-ST-ZIP ST PETERSBURG FL 33704

☐ DELETE

TITLE D  
NAME NASH, BRUCE J.  
STREET ADDRESS 4000 E. SOUTHPORT RD. STE 120  
CITY-ST-ZIP INDIANAPOLIS IN

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PRESIDENT + DIRECTOR

MARC L. GRIFFIN

4000 E. SOUTHPORT RD. STE 150

INDIANAPOLIS, IN 46237-3229

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

Marc L. Griffin, President  
MARC L. GRIFFIN, PRESIDENT

6/28/96

317-781-6405

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE #

CR2E034 (3/96)