

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004184

FILED
Feb 05, 2012
Secretary of State

Entity Name: OMNI MANAGEMENT SERVICES INC.

Current Principal Place of Business:

4138 NORTH KEYSTONE AVWENUE
INDIANAPOLIS, IN 46205

New Principal Place of Business:

212 WEST 10TH STREET
B300
INDIANAPOLIS, IN 46202

Current Mailing Address:

4138 NORTH KEYSTONE AVWENUE
INDIANAPOLIS, IN 46205

New Mailing Address:

PO BOX 441570
INDIANAPOLIS, IN 462441570 US

FEI Number: 73-1637869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OMIN MANAGEMENT SERVICES, INC.
8695 COLLEGE PARKWAY
SUITE 1274
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CHRM
Name: LOEHR, TIM
Address: PO BOX 441570
City-St-Zip: INDIANAPOLIS, IN 462441570

Title: P
Name: LOEHR, TIM
Address: PO BOX 441570
City-St-Zip: INDIANAPOLIS, IN 462441570

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY J LOEHR

PRES

02/05/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date