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FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P13007 (0)

1. Corporation Name

PHOENIX FABRICATORS AND ERECTORS, INC.

Principal Place of Business

182 S COUNTY RD. 900 E
PO BOX 34410
INDIANAPOLIS IN 46234
US

Mailing Address

182 S COUNTY RD. 900 E
PO BOX 34410
INDIANAPOLIS IN 46234
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1987

4. FEI Number

35-1676662

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SHORT, JEFFREY A.
STREET ADDRESS 3955 VILLAGE DR
CITY-ST-ZIP NEW PALESTINE IN ☐ DELETE

TITLE VD
NAME BACON, HORACE F
STREET ADDRESS 5591 MUIRFIELD WAY
CITY-ST-ZIP PLAINFIELD IN ☐ DELETE

TITLE VD
NAME LAKIN, CHARLES D.
STREET ADDRESS 745 ABBINGTON STATION
CITY-ST-ZIP DANVILLE IN ☐ DELETE

TITLE VD
NAME WARREN, HUGH K
STREET ADDRESS 8008 FISHBACK RD.
CITY-ST-ZIP INDIANAPOLIS IN ☐ DELETE

TITLE VD
NAME ROTHERBER, EUGENE M
STREET ADDRESS 8070 FISHBACK RD
CITY-ST-ZIP INDIANAPOLIS IN ☐ DELETE

TITLE ST
NAME YOHLE, TIMOTHY F
STREET ADDRESS 12469 BENTLEY BLVD.
CITY-ST-ZIP FISHERS IN ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Timothy F. Yohle

2-17-98

01-27-7002

CR2E034 (10/97)