

SCC eFile

**2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

212550876

1.) CORPORATION NAME:

HERFF JONES, INC.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1607128**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4501 W 62ND ST

CITY/ST/ZIP: INDIANAPOLIS, IN 46268

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JOE K SLAUGHTER
 TITLE: PRESIDENT
 ADDRESS: 8326 EAGLE CREST LANE
 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46234

OFFICER DIRECTOR

NAME: DAVID A BURKERT
 TITLE: VICE PRESIDENT
 ADDRESS: 5777 GYRFALCON PLACE
 CITY/ST/ZIP/CO: CARMEL, IN 46033

OFFICER DIRECTOR

NAME: MICHAEL S. PARRETT
 TITLE: CFO/T/VP
 ADDRESS: 6268 WHITE ALDER COURT
 CITY/ST/ZIP/CO: AVON, IN 46123

OFFICER DIRECTOR

NAME: THOMAS C TANTON
 TITLE: VICE PRESIDENT
 ADDRESS: 11527 Golden Willow Drive
 CITY/ST/ZIP/CO: Zionsville, IN 46077

OFFICER DIRECTOR

NAME: DONALD J AGIN
 TITLE: VICE PRESIDENT
 ADDRESS: 5778 James Blair Drive
 CITY/ST/ZIP/CO: Indianapolis, IN 46234

OFFICER DIRECTOR

NAME: CHRISTINE L BACHMANN
 TITLE: VICE PRESIDENT
 ADDRESS: 10314 OAK RIDGE DR
 CITY/ST/ZIP/CO: ZIONSVILLE, IN 46077

OFFICER DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS A CAREW VICE PRESIDENT 758 FOXBORO DR AVON, IN 46123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK D DILLMAN VICE PRESIDENT 6377 TIMBERCLIMB DR AVON, IN 46123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY T HILL VICE PRESIDENT 320 NORTH 60 EAST HYDE PARK, UT 84318	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID S HOMEIER VICE PRESIDENT 8604 Seaward Court Indianapolis, IN 46256	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH G LANGLOIS VICE PRESIDENT 13256 SNOW OWL DR CARMEL, IN 46033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GINGER D PLEXICO VICE PRESIDENT 4726 JENNYS ROAD INDIANAPOLIS, IN 46228	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETER A SLAMKOWSKI VICE PRESIDENT 14408 ADIOS PASS CARMEL, IN 46032	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL D BAYSTON DIRECTOR 205 N. MICHIGAN CHICAGO, IL 60601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDRE B LACY DIRECTOR 54 MONUMENT CIRCLE INDIANAPOLIS, IN 46204	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANN D MURTLow DIRECTOR 8649 Moon Bay Circle INDIANAPOLIS, IN 46236	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT S. POTTS DIRECTOR 11652 WEEPING WILLOW CT ZIONSVILLE, IN 46077	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: THOMAS E REILLY TITLE: DIRECTOR ADDRESS: 8877 PICKWICK DRIVE CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46260	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN T THOMPSON TITLE: DIRECTOR ADDRESS: 2225 N. COLLEGE AVE CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46205	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jeffrey Webb TITLE: PRESIDENT ADDRESS: 6745 Lenox Center Court, Suite 300 CITY/ST/ZIP/CO: Memphis, TN 38115	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Matthew R Barth TITLE: VICE PRESIDENT ADDRESS: 5422 North Grandin Hall Circle CITY/ST/ZIP/CO: Carmel, IN 46033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Catherine Annette Rollyson TITLE: VICE PRESIDENT ADDRESS: 41 Oak Tree Drive CITY/ST/ZIP/CO: Brownsburg, IN 46112	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Megan McQuire TITLE: VICE PRESIDENT ADDRESS: 13476 Winamac Court CITY/ST/ZIP/CO: Carmel, IN 46032	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ DAVID S HOMEIER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID S HOMEIER, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	3/28/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		