

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214545817
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1.) CORPORATION NAME: Fink, Roberts & Petrie, Inc.	DUE DATE: 10/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: INCorp SERVICES INC 7288 HANOVER GREEN DR MECHANICSVILLE, VA	SCC ID NO: F1723560				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HANOVER COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: IN	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100,000
CLASS	AUTHORIZED				
COMMON	100,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9449 PRIORITY WAY WEST DRIVE
STE 200

CITY/ST/ZIP: INDIANAPOLIS, IN 46240

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM G HORTON		
TITLE: PRESIDENT		
ADDRESS: 9449 PRIORITY WAY WEST DR SUITE 200		
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SCOTT E ROUSE		
TITLE: VP/DIR		
ADDRESS: 9449 PRIORITY WAY WEST DR SUITE 200		
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TIM L WEISMAN		
TITLE: TREASURER		
ADDRESS: 9449 PRIORITY WAY WEST DR SUITE 200		
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID T LASH		
TITLE: SECRETARY		
ADDRESS: 9449 PRIORITY WAY WESST DR SUITE 200		
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL C NATALI		
TITLE: DIRECTOR		
ADDRESS: 9449 PRIORITY WAY WEST DR SUITE 200		
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240		

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/ TIM L WEISMAN	TIM L WEISMAN, TREASURER	10/6/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.