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			LANE	COUNTY	
			FILED FO	LAKE COUNTY FILED FOR RECORL	
	2005	000661	2005 111 25	PM 12: 50	
NFORMATION REQUEST DLLOW INSTRUCTIONS (front and back) (
ADNAME & PHONE OF CONTACT (optional)	FILING OFFICE ACCT &	7	MICHAEL . REOU	: BROWN	
Amy 365-4092 OR Kares BORETURN TO: (Name and Address)	1 365.4864		HEGO	4 4 3	
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The Pane	er Chase of	Ï			
	Indiana, Inc.				
	evieve Drive , IN 46373	· •			
Si. John,	, IN 40073				
DERTOR MANE to be considered to the			E SPACE IS FOR FILING OFFIC	E USE ONLY	
10CDRGANIZATION'S NAME			0 6		
Components &	Distributions, I	nc. a/b/a	MIDDLE NAME	SUFFIX	
THE STATE OF THE S	PAGE 18-ONE		. I I I	SOFFE	
INFORMATION OPTIONS relating to U	JCC filings and other notices on file in the	filing office that include a	s a Debtor name the name identif	ed in item 1:	
	(Optional)		CONTRACTOR OF THE PARTY OF THE		
Select one of the following two options		response that is complete	e, including flings that have lapse	dD UNLAPSED	
2bDCOPY REQUEST CERTIFIC Select one of the following two options	IED (Optional) s: MALL UNLAPSED				
26D SPECIFIED COPIES ONLY	CERTIFIED (Optional)				
				1	
Record Number	Date Record Filled (if required)	Type of Record and A	dditional identifying information	n (if required)	
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ADDITIONAL SERVICES:					
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		Thru d	ate: 1-22-0	<u> </u>	
DDELIVERY INSTRUCTIONS (request will b	e completed and mailed to the address shown in	item B unless otherwise inst	ducted here);	•	
4aC Pick Up					
4bC Other Specify desired method bass (if avail	lable from this office); provide delivery information (e)(Odelivery service's name, addre	ssee's account if with delivery service, ad-	dressee's phone #, etc@	

FILING OFFICE COPY (1) __ NATIONAL INFORMATION REQUEST (FORM LICCLE) (REVIDE/09/01)