


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 08:00 AM
Secretary of State

DOCUMENT # F94000002880
 1. Entity Name
HILLERICH & BRADSBY CO.



Principal Place of Business P.O. BOX 35700 LOUISVILLE, KY 40232	Mailing Address P.O. BOX 35700 LOUISVILLE, KY 40232
---	---



01312004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 61-0225940	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of

SIGNATURE: _____ DATE: 3-5-04

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HILLERICH, JOHN PO BOX 35700 LOUISVILLE, KY 40232
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT FISHER, HAROLD E 5008 DEE ROAD LOUISVILLE, KY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V JOHNSON JR, WILLIAM 42 STERLING ROAD LOUISVILLE, KY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MARTIN, NANCY L 2100 HENRIOTT ROAD GEORGETOWN, IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT FRANCK, BRENDA J 2714 TREGARON AVENUE LOUISVILLE, KY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000084458
 03/11/04-80007-007 150.00

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. Johnson Jr. DATE: 3-5-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR