2001 UNIFORM BUSINESS REPORT (UBR)

Apr 26, 2001 8:00 am Secretary of State DOCUMENT # **F9400005639** PRESNELL ASSOCIATES, INC. -26-2001 90029 023 ***150.00 Principal Place of Business Mailing Address 717 WEST MAIN STREET 717 WEST MAIN STREET LOUISVILLE KY 40202 LOUISVILLE KY 40202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 61-0865261 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) \Box Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITI F PC TITLE ☐ Change X Addition 🗶 Delete Wendell P. Wright 5302 Mocking bird Vallay Rd NAME PRESNELL, DAVID G JR NAME STREET ADDRESS STREET ADDRESS 7103 HUNTING CREEK DR CITY-SY-ZIP CITY-ST-ZIP LaGrange, KY 40031 PROSPECT KY Delete TITLE Change Addition TITLE evd NAME NAME SINGLA, AMAR C STREET ADDRESS STREET ADDRESS 215 CAMBRIDGE STATION ROAD CITY-ST-ZIP CITY-ST-ZIP LOUISVILLE KY 40223 ☐ Delete TIT! F Change Addition TITLE NAME NAME VAUGHN, GEORGE C STREET ADDRESS STREET ADDRESS 110 MAPLE AVE CITY-ST-ZIP CITY - ST- 7IP PEWEE VALLEY KY ☐ Delete TITLE TD Change Addition TITLE NAME BURKHOLDER, DAVID M NAME STREET ADDRESS STREET ADDRESS 6902 CROSSBOW PLACE CITY-ST-ZIP CITY-ST-ZIP PROSPECT KY 40059 Delete TITLE Change ■ Addition TITLE evd NAME NAME WRIGHT, DAVID W STREET ADDRESS STREET ADDRESS 8814 JUNIPER SPRINGS PLACE C!TY-ST-ZIP CITY-ST-7IF LOUISVILLE KY 40242 ☐ Deiete TITLE ☐ Change ☐ Addition TITLE NAME NAME SIREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dand M. Bullalle

CFO/Sr. KP. / Treasurer DAVID M BURKHOLDER

4/6/2001 502-585-2222

FILED

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