

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F23000005159

**Entity Name:** HOSKIN & MUIR, INC.

**Current Principal Place of Business:**

4795 SHEPHERDSVILLE RD  
LOUISVILLE, KY 40218

**Current Mailing Address:**

4795 SHEPHERDSVILLE RD  
LOUISVILLE, KY 40218 US

**FEI Number:** 94-2319959

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN OF THE BOARD  
Name MAYHORN, DARRYL  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title VP  
Name PETTS, HARRISON  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title DIRECTOR  
Name BENSON, GEORGE S.  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title DIRECTOR  
Name FULTON, JASON  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title DIRECTOR  
Name PETTS, HARRISON  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title DIRECTOR  
Name ROBERTS, BRADLEY J.  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title DIRECTOR  
Name GARDNER, RICHARD  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title PRESIDENT/CEO  
Name MCCLAMROCK, CURTIS  
Address 4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: HOLLY CROPPER**

**CORPORATE  
CONTROLLER**

**04/10/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           PETTS, HARRISON  
Address        4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title           SECRETARY  
Name           PETTS, HARRISON  
Address        4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218

Title           CORPORATE CONTROLLER  
Name           CROPPER, HOLLY  
Address        4795 SHEPHERDSVILLE RD  
City-State-Zip: LOUISVILLE KY 40218