## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002880

Entity Name: HILLERICH & BRADSBY CO.

**Current Principal Place of Business:** 

800 WEST MAIN STREET LOUISVILLE, KY 40202

**Current Mailing Address:** 

800 WEST MAIN STREET LOUISVILLE, KY 40202

FEI Number: 61-0225940 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 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:

Title

Electronic Signature of Registered Agent

Date

**FILED** Apr 05, 2014

**Secretary of State** 

CC7550325119

Officer/Director Detail :

۱/P

Title Title

HILLERICH IV, JOHN EDLIN, LARRY Name Name

Address 800 WEST MAIN STREET Address 800 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202 LOUISVILLE KY 40202 City-State-Zip:

Title S Title TREASURER, CFO COO

Name MARTIN, NANCY L Name WRITER, LAWRENCE Address 2100 HENRIOTT ROAD Address 800 WEST MAIN STREET GEORGETOWN IN City-State-Zip: LOUISVILLE KY 40202 City-State-Zip:

VΡ Title Title D

Name CLARK, BILL HILLERICH, JOHN III Name

Address 800 WEST MAIN STREET 800 WEST MAIN STREET Address City-State-Zip: LOUISVILLE KY 40202 City-State-Zip: LOUISVILLE KY 40202

Title VΡ

Name LYVERSE, STEVE LIENHART, JEFF Name

800 WEST MAIN STREET Address Address 800 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202 City-State-Zip: LOUISVILLE KY 40202

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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: TANEE BREWER

ASSISTANT TREASURER

04/05/2014

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VP

Name REDMAN, RICK

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title ASST. TREASURER

Name BREWER, TANEE

Address 800 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VP

Name SCHLEGEL, KYLE

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR

Name VARGA, ANDREW

Address 800 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title ASSISTANT CORPORATE SECRETARY

Name GANT, KIMBERLEY

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VP

Name SANTELLA, RON

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VP

Name BROWN, CHARLEY

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR

Name CORDOVA, CARL

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR

Name COLLINS, SEAN

Address 800 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202