

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006936

Entity Name: BKK FINANCIAL, INC.**Current Principal Place of Business:**2810 WILLOW LAKE DRIVE
INDIANAPOLIS, IN 46268**Current Mailing Address:**500 NORTH HURSTBOURNE PARKWAY
SUITE 400
LOUISVILLE, KY 40222 US**FEI Number:** 35-1868440**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	C/D
Name	NICHOLS, J D
Address	500 NORTH HURSTBOURNE PARKWAY SUITE 400
City-State-Zip:	LOUISVILLE KY 40222

Title	EVP
Name	WELLS, GREGORY A
Address	500 NORTH HURSTBOURNE PARKWAY SUITE 400
City-State-Zip:	LOUISVILLE KY 40222

Title	VP/T
Name	PITCHFORD, DAVID B
Address	500 NORTH HURSTBOURNE PARKWAY SUITE 400
City-State-Zip:	LOUISVILLE KY 40222

Title	PRES
Name	LAVIN, BRIAN F
Address	500 NORTH HURSTBOURNE PARKWAY SUITE 400
City-State-Zip:	LOUISVILLE KY 40222

Title	VP/S
Name	TAFEL, ROSANN D
Address	500 NORTH HURSTBOURNE PARKWAY SUITE 400
City-State-Zip:	LOUISVILLE KY 40222

Title	VP
Name	NICHOLS, KIMBERLY A
Address	500 NORTH HURSTBOURNE PARKWAY SUITE 400
City-State-Zip:	LOUISVILLE KY 40222

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: ROSANN D. TAFEL**SECRETARY****04/09/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date