

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 818545

1. Corporation Name

BRIGHTON ENGINEERING COMPANY

Principal Place of Business
201 BRIGHTON PARK BLVD.
FRANKFORT KENTUCKY 40601

Mailing Address
201 BRIGHTON PARK BLVD.
FRANKFORT KENTUCKY 40601

FILED
Feb 17, 1999 8:00am
Secretary of State

02-17-1999 90074 013 ****150.00



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

03/03/1965

4. FEI Number

61-0468238

Applied For

Not Applicable

5. Certificate of Status-Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LITSCHGI, BYRNE
2200 FIRST FINANCIAL TOWER
TAMPA FL 33600

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME MOECK, L PAUL
STREET ADDRESS 40 SPENDTHRIFT
CITY-ST-ZIP FRANKFORT KY

TITLE DC ☐ DELETE
NAME MAY, WILLIAM S
STREET ADDRESS 401 COUNTRY LANE
CITY-ST-ZIP FRANKFORT KY

TITLE STD ☐ DELETE
NAME MAY, KAREN G
STREET ADDRESS 401 COUNTRY LANE
CITY-ST-ZIP FRANKFORT KY

TITLE D ☐ DELETE
NAME JOHNSON, WILLIAM G JR
STREET ADDRESS 328 FARMBROOK CIRCLE
CITY-ST-ZIP FRANKFORT KY

TITLE D ☐ DELETE
NAME DUKE, GORDON C
STREET ADDRESS 104 SOUTH CREEK
CITY-ST-ZIP FRANKFORT KY

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

L. MOECK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 Jan 1999 (502) 695-2300
Date Daytime Phone #

CR2E034 (1/98)