## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Aug 07, 2006 8:00 am Secretary of State 08-07-2006 90041 010 \*\*\*150.00

1. Entity Name RIETSCHLE THOMAS HANOVER, INC.						05-07-2000	20041 010	, 13	0.00	
Principal Place of Business 4360 BROWNSBORO ROAD STE. 300 LOUISVILLE, KY 40207		Mailing Address 4360 BROWNSBORO ROAD STE. 300 LOUISVILLE, KY 40207			e complete de la completa de la comp			)244		
2. Principal Place of Business		3. Mailing Address 1800 Gardner Expressiva		รรเมณ						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07202006	Chg-P	CR2E034	(11/05)		
City & State		Ouncy, IL			4. FEI Number 52-1302			_ <u>_                                    </u>	plied For	
Zip	Country	Zip 0	Country United Sta	tec		f Status Desired		B.75 Add	litional	
	6. Name and Address of Current			· · · · · ·	7. Name and	ddress of New R	tegistered Ag	ent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301				Name Street Address (P.O. Box Number is Not Acceptable)						
			City			- 121	FL	Zip Codi	9	
	Signature, typed or printed name of registered agent LE NOWIII FEE IS \$150.00 ue by September 6, 2006	9. Election Campaig Trust Fund Contr		\$5.	when reinstating)  00 May Be ed to Fees	In accordance v				
10.	OFFICERS AND		11,	000		HANGES TO OFF			<del></del>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BROWN, TIMOTHY C 4360 BROWNSBORO ROAD ST LOUISVILLE, KY 40207	E. 300	NAME STREET ADDRESS CITY-ST-ZIP	Hei	sident en Coen Gardne wu	ell R Expres	•	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS STUECKER, PHILLIP J 4360 BROWNSBORO ROAD ST LOUISVILLE, KY 40207	⊠ Delete E. 300	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP4 TR.01 1800	Secretar Cy Paglio	Exbessmo ragr	•	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WISEMAN, RONALD D 4360 BROWNSBORO ROAD ST LOUISVILLE, KY 40207	<b>⅓</b> Delete "E. 300	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1800 1800	Secretor Stemu Ste	sy ele & Express	•	<b>∐</b> Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-3-		[	Change	☐ Addition	
TITLE NAME STREET ADDRESS CHTY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				[	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			****	(	Change	Addition .	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.