

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

04-20-2007 90203 042 ****61.25

DOCUMENT # F06000000772 1. Entity Name THE MASONIC HOMES OF KENTUCKY, INC.																																																																																																																																																					
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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 617, 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.																																																																																																																																																					
SIGNATURE: <u><i>Joseph R. Conway</i></u> 4/10/07 502.993-0192 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																																					

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20008783

DOCUMENT # F06000000772			
1. Entity Name THE MASONIC HOMES OF KENTUCKY, INC.			
Principal Place of Business 3761 JOHNSON HALL DRIVE MASONIC HOME, KY 40041-9002		Mailing Address 3761 JOHNSON HALL DRIVE MASONIC HOME, KY 40041-9002	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
04092007		Chg-NP	CR2E037 (12/06)
4. FEI Number 61-0458374		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renaming)			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CONWAY, JOSEPH R 6839 GREEN MEADOWS CIRCLE LOUISVILLE, KY 40207 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) RIDDELL T. DWAIN ☐ Change ☐ Addition 407 POPLAR ST RAVENNA, KY 40336
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC DEAN, FORREST V 778 REBECCA ROAD LEXINGTON, KY 40502 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) RUTLEDGE DENNIS ☐ Change ☐ Addition 1306 RHONDA WAY LOUISVILLE, KY 40216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILEY, JAMES A 426 POWHATAN TRAIL FRANKFORT, KY 40601 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) SMITH CLAUDE T. ☐ Change ☐ Addition 1519 WOODLUCK AVE LOUISVILLE, KY 40205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARNETT, ROGER D 9410 STONELANDING PLACE LOUISVILLE, KY 40272 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) STRATTON, ROBT J. ☐ Change ☐ Addition 209 SHORELINE DR. SHELBYVILLE, KY 40065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURGE, HAROLD 870 CROPPER ROAD SHELBYVILLE, KY 40065 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) WALTERS MARTIN R ☐ Change ☐ Addition 3507 WINCHESTER RD. LOUISVILLE, KY 40207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTLER, M. MASON 3021 MEETING STREET FALLS CHURCH, VA 22044 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) THORNTON, JOSEPH C. ☐ Change ☐ Addition 4702 CHAUNCEY LEE LN. LOUISVILLE, KY 40241
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 617, 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.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
Date Daytime Phone			

ATTACHMENT

66013519

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04092007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 61-0458374	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC DEAN, FORREST V 778 REBECCA ROAD LEXINGTON, KY 40502	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) JOHNSTON, CURTIS L. 809 WESTSIDE EARLINGTON, KY 42410	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILEY, JAMES A 426 POWHATAN TRAIL FRANKFORT, KY 40601	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) JUDY JAMES S. 6506 DEEP CREEK DR. LOUISVILLE, KY 40059	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARNETT, ROGER D 9410 STONELANDING PLACE LOUISVILLE, KY 40272	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(T/D) LARIMORE VIRGIL T. 1007 JUNIPER SPRINGS DR. LOUISVILLE, KY 40242	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTLER, M. MASON 3021 MEETING STREET FALLS CHURCH, VA 22044	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) POWELL GREGORY C. 2096 ANGELA CT. VILLA HILLS, KY 41017	☐ Change ☐ Addition
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SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

20008783

ATTACHMENT

66013579