

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001076

FILED
Apr 30, 2008
Secretary of State

Entity Name: LOUISVILLE TRUST COMPANY

Current Principal Place of Business:

1346 S. THIRD STREET
LOUISVILLE, KY 40208

New Principal Place of Business:

Current Mailing Address:

1346 S. THIRD STREET
LOUISVILLE, KY 40208

New Mailing Address:

FEI Number: 61-1341477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SACHS, MORTON H
603 LONGBOAT CLUB ROAD
UNIT N-101
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: SACHS, MORTON H
Address: 1346 S. THIRD STREET
City-St-Zip: LOUISVILLE, KY 40208 US

Title: P () Delete
Name: MARK S. GREGORY,
Address: 1346 S. THIRD STREET
City-St-Zip: LOUISVILLE, KY 40208 US

Title: D () Delete
Name: SHAPERO, JULIAN L
Address: 4008 WOODSTONE WAY
City-St-Zip: LOUISVILLE, KY 40241 US

Title: D () Delete
Name: DOBBINS, MARK
Address: ONE RIVERFRONT PLAZA #1400
City-St-Zip: LOUISVILLE, KY 40202 US

Title: V () Delete
Name: STEELE, BARBARA J
Address: 1346 S. THIRD STREET
City-St-Zip: LOUISVILLE, KY 40208 US

Title: D () Delete
Name: GARRETT, FRED JR
Address: 1124 RED FOX ROAD
City-St-Zip: LOUISVILLE, KY 40205 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MORTON H. SACHS

C

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date