


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Jun 20, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000002130
 1. Entity Name
 CHARAH, INC.



Principal Place of Business Mailing Address
 307 TOWNEPARK CIRCLE UNIT M 307 TOWNEPARK CIRCLE UNIT M
 SUITE 100 SUITE 100
 LOUISVILLE, KY 40243 LOUISVILLE, KY 40243

DO NOT WRITE IN THIS SPACE



05172007 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1127098	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BUSINESS FILINGS INCORPORATED
 1203 GOVERNOR'S SQUARE BLVD
 SUITE 101
 TALLAHASSEE, FL 32301-2960

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP PRICE, CHARLES E 307 TOWNEPARK CIRCLE UNIT STE 100 LOUISVILLE, KY 40243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PRICE, JANET 307 TOWNEPARK CIRCLE UNIT STE 100 LOUISVILLE, KY 40243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000766444
 06/20/07-80001-003 150.00

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: Janet Price, v. P. 6-13-07 502-245-1353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #