2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# F07000001103

Entity Name: DIVISIONS, INC.

Current Principal Place of Business:

401 PARK AVENUE
NEWPORT, KY 41071

New Principal Place of Business:

Current Mailing Address:

401 PARK AVENUE
NEWPORT, KY 41071

New Mailing Address:

FEI Number: 61-1346414 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: V ( ) Delete
Name: LACKEY, DOUG
Address: 10508 SCARLET OAK CT
City-St-Zip: LOUISVILLE, KY 40241

Title: P ( ) Delete
Name: MITCHELL, GARY
Address: 270 RIDGEPOINTE
City-St-Zip: COLD SPRINGS, KY 41076

Title: T ( ) Delete
Name: MITCHELL, GRANT
Address: 117 HUNTER'S HILL
City-St-Zip: ALEXANDRIA, KY 41001

Title: V ( ) Delete
Name: SAKSON, HUGO
Address: 7549 DOGWOOD LANE
City-St-Zip: FLORENCE, KY 41042

Title: S ( ) Delete
Name: SMITH, ANDY
Address: 9 BLUE ROCK COURT
City-St-Zip: ALEXANDRIA, KY 41001

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
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: HUGO SAKSON V 01/14/2009

Electronic Signature of Signing Officer or Director — Date