## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000001103

Entity Name: DIVISIONS, INC.

FILED Apr 09, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

300 DAVE COWENS DR 1 RIVERFRONT PLACE SUITE 510 SUITE 510

SUITE 510 SUITE 510 NEWPORT, KY 41070 SUITE 510 NEWPORT, KY 41071

Current Mailing Address: New Mailing Address:

300 DAVE COWENS DR
SUITE 510
NEWPORT, KY 41070

1 RIVERFRONT PLACE
SUITE 510
NEWPORT, KY 41071

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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

## **OFFICERS AND DIRECTORS:**

Title:

Name: LACKEY, DOUG

Address: 10508 SCARLET OAK CT City-St-Zip: LOUISVILLE, KY 40241

Title: F

Name: MITCHELL, GARY Address: 270 RIDGEPOINTE

City-St-Zip: COLD SPRINGS, KY 41076

Title: T

Name: MITCHELL, GRANT
Address: 117 HUNTER'S HILL
City-St-Zip: ALEXANDRIA, KY 41001

Title: \

 Name:
 SAKSON, HUGO

 Address:
 7549 DOGWOOD LANE

 City-St-Zip:
 FLORENCE, KY 41042

Title: S

Name: SMITH, ANDY
Address: 9 BLUE ROCK COURT
City-St-Zip: ALEXANDRIA, KY 41001

I hereby 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 all other like empowered.

SIGNATURE: GARY MITCHELL CEO 04/09/2012