2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003961

Entity Name: THE BANKER'S STORE, INC.

FILED Mar 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1535 MEMPHIS JUNCTION RD BOWLING GREEN, KY 42101 **Current Mailing Address: New Mailing Address:** 1535 MEMPHIS JUNCTION RD BOWLING GREEN, KY 42101 FEI Number: 22-3755756 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: INCORP SERVICES, INC 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HAYDEN, DUANE Name: Name: COOK, THOMAS 1407 WOODBURN ALLEN SPRINGS RD 500 N. RAINBOW BLVD STE 300 Address: Address: City-St-Zip: WOODBURN, KY 42170 City-St-Zip: LAS VEGAS, NV 89107 VCD Title: Title: () Delete (X) Change () Addition Name: URYASZ, DIANE Name: ANDEREGG, ROBERT P 3582 MATADOR WEST #201 5903 WORTHINGTON WAY Address: Address: TRAVERSE CITY, MI 49684 PROSPECT, KY 40059 City-St-Zip: City-St-Zip: Title: () Delete Title: DS (X) Change () Addition JOLITZ, JOAN JOLITZ, JOAN Name: Name: 417 BARLOW 417 BARLOW Address: Address: City-St-Zip: TRAVERSE CITY, MI 49686 City-St-Zip: TRAVERSE CITY, MI 49686 Title: () Delete Title: () Change () Addition BELCHER, ALLISON Name: Name: Address: 9105 CAMINO VILLA BLVD Address: City-St-Zip: City-St-Zip: TAMPA, FL 33635 Title: Title: () Delete (X) Change () Addition HAYDEN, CINDY Name: Name: WILSON, STEVE 1407 WOODBURN ALLEN SPRINGS RD Address: 2200 CARRINGTON CT Address: City-St-Zip: WOODBURN, KY 42170 City-St-Zip: LEXINGTON, KY 40513

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: ALLISON BELCHER D 03/09/2009