

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90017 014 ***150.00

DOCUMENT # F92000000058

1. Corporation Name
KENTUCKY FINANCE CO., INC.

Principal Place of Business

250 CARPENTER FREEWAY
IRVING TX 75062-2729

Mailing Address

P O BOX 660237
CORP TAX DEPT
DALLAS TX 75266-0237
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1992

4. FEI Number

61-0402867

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	JOHN E. GODFREY	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
250 CARPENTER FREEWAY	IRVING TX		
1.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 NAME	JOHN E. GODFREY		
250 CARPENTER FREEWAY	IRVING TX		
1.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 NAME	JAMES S. JOHNSON		
250 CARPENTER FREEWAY	IRVING TX		
1.1 TITLE	AVAS	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 NAME	GREENE, PATRICK J.		
250 CARPENTER FREEWAY	IRVING TX		
1.1 TITLE	VT	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 NAME	HUGHES, JOHN F		
250 CARPENTER FREEWAY	IRVING TX		
1.1 TITLE	S	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 NAME	HAYES, TIMOTHY M.		
250 CARPENTER FREEWAY	IRVING TX		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 statement as required by Chapter 897, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowers.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PATRICK J. GREENE
ASST VICE PRESIDENT
& ASST SECRETARY

4/19/99

CR2E034 (1/98)