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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300002810 (0)

KENTUCKY CLEANING MANAGEMENT, INC.

Principal Place 10101 LINN ST SUITE 600 LOUISVILLE KY	ATION RD.	Mailing Address 10101 LINN STATION I SUITE 600	Mailing Address 10101 LINN STATION RD.							
					1	3. Date incorporated or Qualified 06/11/1993	3a. Date of L 04/19/19		port	
<u> </u>	lace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number	1 0.7.07.10	$\overline{}$	plied For	
21	# -1-	26	Suite, Apt. #, etc.			61-1238554			t Applicable	
Suite, Apt.		27	27			5. Certificate of Status Desired	1 1 7 -	ee Red	dditional quired	
City & State	θ 	City & State				Election Campaign Financing Trust Fund Contribution			May Be o Fees	
Zip Country		Zip	Countr	ry		8. This corporation has liability for i		der s.	199.032,	
24 25 9. Name and Address of Current F		29 rent Registered Agent				Florida Statutes 10. Name and Address of New Rec	Yes No			
		Idili Mağısterati Ağeni	81	т <u>г</u>	Namo	10. Name and Address of New Re	diereied Adeir			
	CORPORATION SYSTEM SOUTH PINE ISLAND ROAD	1		L						
	NTATION FL 33324		82	! 5	3troet Addres	ss (P.O. Box Number is Not Acceptab	ile)			
10.	MANUAL COOLS		83	十						
,*			84	(City		B5	Zip C	Code	
44 (0	to the provinces of Captions CO7.0	SEAR and EAT LEAR Florida Cu	states the show			vertice a shorter this statement for the n	FL ⁵³	-las-it-		
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	ato of Florida, Such change w	atutes, the abov as authorized b	re∙n y th	amed corpo ne corporatio	oration submits this statement for the pon's board of directors. I hereby accep	ourpose of chang of the appointme	nt as r	registered registered	
l	m tamiliar with, and accept the ob	ligations of, Section 607.0505	, Florida Statute	S.						
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE: Rog stored Ag	jent s	signature required	d when reinstating)	DATE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS	3 IN 12	
TITLE	CT	DELETE	1.1 TITLE				Ch	ange	Addition	
NAME	SCUDDER, CHARLES D III		1.2 NAME							
STREET ADDRESS	10101 LINN STATION RD., S	SUITE 800	1.3 STREE	T ADI	DRESS					
CITY-ST-ZIP	LOUISVILLE KY 40223 DVS	DELETE	1.4 CITY-	S1 - Z	!F				THE STREET	
TITLE	SCUDDER, DIANE L	☐ DETER		21 TITLE			L Ch	ange	☐ Addition	
NAME STREET ADDRESS	10101 LINN STATION RD., S	SHITE AND	1	2.2 NAME 2.3 STREET ADDRESS						
CITY-ST-ZIP	LOUISVILLE KY 40223	SOILE GOV	2.3 STREE							
TITLE	P	DELETE	3.1 HitE	31-7	LIF		☐ Ch	ange	Addition	
NAME	BARKER, JERRY ANN		3.2 NAME		1			-		
STREET ADDRESS	10101 LINN STATION RD.,S	UITE 600	3.3 STREE	1 ADI	DRESS					
CITY-ST-ZIP	LOUISVILLE KY 40223		3.4. CITY -	ST-2	ZIP_					
TITLE		DECETE	4.1 TITLE				□ Ch	ange	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	I ADI	DRESS					
CITY-ST-ZIP		T DEVEN	4.4 CITY-	S1 - Z	!IP					
TITLE		☐ DELETE	51 TITLE				∐ Ch	ange	☐ Addition	
NAME STREET ADDRESS			5.2 NAME 5.3 STREE	2 4 DI	DEFE					
CITY-ST-ZIP			5.4 CITY -		- 1					
TITLE	···	DELETE	6.1 Till E	31-2	"	,	☐ Ch	ange	Addition	
NAME			6.2 NAME				_	-		
STREET ADDRESS			6.3 STREE	1 ADE	DRESS					
CITY-ST-ZIP			6.4 CITY-							
Information I am an of	n indicated on this annual report o	or supplemental annual report or the receiver or trustee emp	is true and acc powered to exe	urat	te and that m	in Section 119.07(3)(i), Florida Statutes ny signature shall have the same lega as required by Chapter 607, Florida S	feffect as if mad tatules; and that	ie und I my <u>n</u> a	ier oath; that ame	