

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002880

Entity Name: HILLERICH & BRADSBY CO.

FILED
Jan 02, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 35700
LOUISVILLE, KY 40232

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 35700
LOUISVILLE, KY 40232

New Mailing Address:

FEI Number: 61-0225940 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: P () Delete
Name: HILLERICH, JOHN
Address: PO BOX 35700
City-St-Zip: LOUISVILLE, KY 40232

Title: VT () Delete
Name: LEGASPI, ROY
Address: PO BOX 35700
City-St-Zip: LOUISVILLE, KY 40232

Title: V () Delete
Name: JOHNSON JR, WILLIAM
Address: 42 STERLING ROAD
City-St-Zip: LOUISVILLE, KY

Title: S () Delete
Name: MARTIN, NANCY L
Address: 2100 HENRIOTT ROAD
City-St-Zip: GEORGETOWN, IN

Title: AT () Delete
Name: FRANCK, BRENDA J
Address: 2714 TREGARON AVENUE
City-St-Zip: LOUISVILLE, KY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HILLERICH, JOHN
Address: 800 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: VT (X) Change () Addition
Name: LEGASPI, ROY
Address: 800 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: V (X) Change () Addition
Name: ROBINSON, SCOTT
Address: 800 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: FRANCK, BRENDA J
Address: 800 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT ROBINSON

V

01/02/2007

Electronic Signature of Signing Officer or Director

_____ Date