2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 23, 2006 8:00 am Secretary of State

1. Entity Name	N KENTUCKY UNIVERSI		NDATION, A				01-23-200	6 90056 01	O ****(51.25
Principal Place ONE BIG RED BOWLING GRI		ONE	g Address BIG RED WAY LING GREEN, KY	12101			600	05541		
1906 C	lace of Business ollege Heights Blyd	. 190G		Heights B	lvd.					
Suite, Apt.	#, etc. U	\$ui	ite, Apt. #, etc.			01132006 Ch	ng-NP	CR2E037 (1	<u> </u>	
City & State			uling Gree	n, KY		4. FEI Number 61-125155	5			olied For Applicable
zip 4210	O/ Country	Zip Y	12101	Country		5. Certificate of Sta	atus Desired		75 Addi Required	
	6. Name and Address of Curre	nt Registere	d Agent	Name		7. Name and Add	ress of New R	tegistered Ager	nt	
LEWIS, DI						O Pay Number is h	let Assentable	-\		
	UMSEH DR. LM BEACH, FL 33409			Steet 4	Octobs (i	P.O. Box Number is t	NOT ACCEPTABLE	ə) 		
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				City				FL	Zip Code	T.
	named entity submits this statement	t for the purp	ose of changing its	registered office of	r register	ed agent, or both, in	the State of Fig	orida. I am fami	liar with, a	and accept
the obligati	ions of registered agent.									
SIGNATURE .	Signature, typed or printed name of registered ag	year and title f ann	Ventio (NOT	E Registered Agent signa	 	uden (enstabora)		DATE		
	2/Quarrier shoed or braised units of redizionen an	ללוציי פלוו וויוציוויפן						DATE		
•		<u> </u>		C registered Agent signe	dure required	witett (ett strate)				
	Filing Fee is \$61.25 Due by May 1, 2006		9. Election Ca	mpaign Financing Contribution.	aure required	\$5.00 May Be Added to Fees		lake check pa rida Departme	-	
10.	_		9. Election Ca	mpaign Financing	0	\$5.00 May Be	Flor	rida Departme	nt of Sta	ate
TITLE	OFFICERS AND		9. Election Ca	mpaign Financing Contribution.		\$5.00 May Be Added to Fees ADDITIONS/CHANG	Flor	rida Departme	nt of St	ate
TITLE NAME	OFFICERS AND P BAKER, JERRY		9. Election Ca Trust Fund (mpaign Financing Contribution.	P Page	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Flor	rida Departme	nt of Sta	ate
TITLE	OFFICERS AND	DIRECTORS	9. Election Ca Trust Fund (mpaign Financing Contribution. 11. IITLE NAME	P Page	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Floi ES TO OFFICE	rida Departme	nt of Sta	ate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE	Jana Clarkon	Paula C Jarboe	1/17/06	
	BIGNATURE (IND. TYPED OR PRINTED NAM	E OF SIGNING OFFICER OR DIRECTOR	Date	Daylime Phone #

SMITHFIELD, KY 40068

CITY-ST-ZIP