


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90158 016 ***150.00

DOCUMENT # F99000000580	
1. Entity Name CHURCHILL DOWNS MANAGEMENT COMPANY	

Principal Place of Business 700 CENTRAL AVENUE LOUISVILLE, KY 40208	Mailing Address 700 CENTRAL AVENUE LOUISVILLE, KY 40208
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04182006 Chg-P CR2E034 (11/05)



4. FEI Number 61-1165963	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNN, KENNETH C 21001 NW 27TH AVENUE MIAMI, FL 33056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD REED, REBECCA C 700 CENTRAL AVENUE LOUISVILLE, KY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MEEKER, THOMAS H 700 CENTRAL AVENUE LOUISVILLE, KY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHMITT, KARL F JR 700 CENTRAL AVENUE LOUISVILLE, KY 40208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SKEHAN, ANDREW G 700 CENTRAL AVENUE LOUISVILLE, KY 40208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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.

SIGNATURE: <u>Rebecca C Reed</u> <u>Rebecca C Reed</u> <u>4/27/06</u> <u>502-636-4400</u>	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #
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ATTACHMENT

40068685

CHURCHILL DOWNS MANAGEMENT COMPANY

Document No. F99000000580

(11) Officers and Directors

F99000000580

Title Name Street Address City – State – Zip	T Michael W. Anderson 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Richard B. Moore 4500 Dan Patch Blvd. Anderson, IN 46013	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Donald R. Richardson 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Steven P. Sexton 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Randall E. Soth 1751 Gentilly Blvd. New Orleans, LA 70119	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Timothy N. Scott 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Cathy Z. Rutter 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	V Kevin C. Seidehamel 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	AS Debra A. Wood 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City – State – Zip	AT/D Michael E. Miller 700 Central Avenue Louisville, KY 40208	<input type="checkbox"/> Change <input type="checkbox"/> Addition