

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 05, 2005 8:00 am**  
**Secretary of State**

05-05-2005 90109 008 \*\*\*150.00

<b>DOCUMENT # F99000005850</b>					
1. Entity Name <b>PEYTON'S-SOUTHEASTERN, INC.</b>					
Principal Place of Business <b>1014 VINE STREET CINCINNATI OH 45202</b>			Mailing Address <b>1014 VINE STREET CINCINNATI OH 45202</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>61-0942129</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301</b>				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	RICE, J. ROBERT		NAME		
STREET ADDRESS	310 WHITTINGTON PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	LOUISVILLE KY 40222		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	NABBERFELT, MARC		NAME		
STREET ADDRESS	310 WHITTINGTON PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	LOUISVILLE KY 40222		CITY-ST-ZIP		
TITLE	VDAS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GACK, BRUCE M		NAME		
STREET ADDRESS	1014 VINE ST		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI OH 45220-1100		CITY-ST-ZIP		
TITLE	VASD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HELDMAN, PAUL W		NAME	VS	
STREET ADDRESS	1014 VINE ST		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI OH 45202-1100		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HENDERSON, SCOTT M		NAME	VT	
STREET ADDRESS	1014 VINE STREET		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI OH 45202-1100		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MCMULLEN, W. RODNEY		NAME		
STREET ADDRESS	1014 VINE STREET		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI OH 45202		CITY-ST-ZIP		



1st MOORE CR2E034 (10/04)

12. 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 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:**

*Thomas A. Smith* **Thomas A. Smith /AT**

4/29/05

513-762-4401

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT 50049393

# F99000005850

PEYTON'S SOUTHEASTERN, INC.  
310 WHITTINGTON PKWY  
LOUISVILLE, KY 40222  
FEDERAL I.D. #61-0942129  
INCORPORATED IN: TN

**OFFICERS:**

NAME	TITLE	BUSINESS ADDRESS
J. ROBERT RICE	PRES. C.E.O.	310 WHITTINGTON PKWY., LOUISVILLE, KY 40222
MARC NABBefeldt	EXEC. V.P.	310 WHITTINGTON PKWY., LOUISVILLE, KY 40222
SCOTT M. HENDERSON	V.P. TREAS.	1014 VINE ST., CINTI., OH 45202-1100
W. RODNEY McMULLEN	V.P.	1014 VINE ST., CINTI., OH 45202-1100
BRUCE M. GACK	V.P. ASST. SEC.	1014 VINE ST., CINTI., OH 45202-1100
PAUL W. HELDMAN	V.P. SEC.	1014 VINE ST., CINTI., OH 45202-1100
BETH VAN OFLEN	ASST. TREAS.	1014 VINE ST., CINTI., OH 45202-1100
THOMAS A. SMITH	ASST. TREAS.	1014 VINE ST., CINTI., OH 45202-1100

**DIRECTORS:**

BRUCE M. GACK  
DOROTHY ROBERTS  
J. ROBERT RICE

ELECTED = 2ND WEDNESDAY IN MARCH