

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000657

Entity Name: W.T. YOUNG, LLC

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

2225 YOUNG DRIVE
LEXINGTON, KY 40589

New Principal Place of Business:

2225 YOUNG DRIVE
LEXINGTON, KY 40588

Current Mailing Address:

2225 YOUNG DRIVE
LEXINGTON, KY 40589

New Mailing Address:

2225 YOUNG DRIVE
LEXINGTON, KY 40588

FEI Number: 61-0545498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: YOUNG, W.T. JR.
Address: 2225 YOUNG DRIVE
City-St-Zip: LEXINGTON, KY 40589

Title: MGR () Delete
Name: WARREN, ROBERT L
Address: 225 YOUNG DRIVE
City-St-Zip: LEXINGTON, KY 40589

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: YOUNG, W.T. JR.
Address: 2225 YOUNG DRIVE
City-St-Zip: LEXINGTON, KY 40588

Title: MGR (X) Change () Addition
Name: WARREN, ROBERT L
Address: 225 YOUNG DRIVE
City-St-Zip: LEXINGTON, KY 40588

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT WARREN

MGR

06/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date