

# 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