2005 LIMITED LIABILITY COMPANY

FILED Mar 28. 2005 08:00 AM

	ANNUA	L REPORT			0, 2003 00.00
DOCUMENT # M9800000972				Sec	retary of State
1. Entity Name MERRITT COMPANY OF KENTUCKY, LLC					
Principal Place of Business 304 WHITTINGTON PARKWAY, SUITE 107 LOUISVILLE, KY 40222 Mailing Address 304 WHITTINGTON PARKWAY, SUITE 107 LOUISVILLE, KY 40222			ALIET 167		
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				5. Certificate of Status Desired	\$5.00 Additional Fee Required
<u> </u>	6. Name and Address of Curren	nt Registered Agent	<u></u>		***************************************
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE			DO NOT WE	RITE	
SUITE 4 WESTON, FL 33331			IN THIS SPACE		
the obligation	itions of registered agent.	for the purpose of changing its registere	ad onice or register	ed agent, or both, in the State of Florio	da. I am familiar with, and accept
	Signature, typed or printed name of registered age	nt and fille if applicable. (NOTE. Registere	d Agent signature required	when reinstating)	DATE
F	iling Fee is \$50.00 lue by May 1, 2005				
9.		BERS/MANAGERS			
TITLE NAME	MGR HENDERMAN, DAVID W			n market and a second a second and a second	,
STREET ADDRESS	304 WHITTINGTON PARKWAY	/, SUITE 107		a an tha a figh an an ann an	
CITY-ST-ZIP	LOUISVILLE, KY 40222 MGR		,	14457777	
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11. 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 is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP

SIGNATURE: X M HUWWWW SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

(502) 425-4800 Daytim# Phone #