2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# P04000173607

Entity Name: CRIMSON MANAGEMENT CORPORATION

Current Principal Place of Business:

280 GULF SHORE DRIVE
UNIT 343
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

3229 SUMMIT SQUARE PLACE
SUITE 210
LEXINGTON, KY 40509

New Mailing Address:

FEI Number: 61-1085165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOBO, DAVID L
280 GULFSHORE DRIVE
UNIT 343
DESTIN, FL 32541 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	BOBO, DAVID L PRES	
Address:	280 GULFSHORE DRIVE UNIT 343	
City-St-Zip:	DESTIN, FL 32541 US	
Title:	VP	( ) Delete
Name:	WIESE, DAVID T VP	
Address:	768 PINNACLE CT.	
City-St-Zip:	LEXINGTON, KY 40515 US	
Title:	TREA	( ) Delete
Name:	MALICOTE, BILLIE L TREAS	
Address:	133 CROWE LANE	
City-St-Zip:	NICHOLASVILLE, KY 40356 US	
Title:	SEC	( ) Delete
Name:	TURNER, MICHELLE B SEC	
Address:	1164 TABORLAKE DRIVE	
City-St-Zip:	LEXINGTON, KY 40502 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID L BOBO PRES 01/13/2009

Electronic Signature of Signing Officer or Director — Date