FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P08855

(9)

21

22 City 23 Ζıp 24

NAME

TITLE

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Crity - ST - ZIP

BALL, ROBERT C

RUSSELL KY

AS

AST

1000 ASHLAND DRIVE

ELLIS, CHARLES D.

LEXINGTON KY

3499 DABNEY DR

THOMAS, RICHARD P.

1000 ASHLAND DR

LEXINGTON KY

PACE, M. R

3499 DABNEY DRIVE

MID-VAL	LEY SUPPLY CO.		()								
Principal Plac	e of Business	М	Mailing Address								
3499 DABNEY DR PO BOX 14000 LEXINGTON KY 40612			3499 DABNEY DR PO BOX 14000 LEXINGTON KY 40512-4000				3. Date Incorporated or Qualified 3a. Date of Last Report 02/07/1996				
2 Principal I	Place of Business	28	Mailing Address				01/27/1986 4. FEI Number	1 02/0		plied For	-
21 Principal ridge of Educations			26				61-0403040 Not Applicable				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required				1
City & State			City & State			±1F171111111111111111111111111111111111	Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip 24	Country 25	29	Zip	30 Co	untry	!	This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent]
CT CORPORATION SYSTEM 660 EAST JEFFERSON STREET TALLAHASSEE FL 32301					82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code					Code	
11. Pursuant office or agent. I	am familiar with, and accept the obl	ligations o	f, Section 607.0505, Flo	orida Sta	tute	S	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of of the appo	changing its	s registered registered	
12.	Signature, typed or printed name of registered OFFICERS A	, 		E Registere	d Age	ent signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE PERS AND	DIRECTOR	S IN 12	100
12. 111LF	PD	SALV CITIC	The second secon		1.1 TITLE		ADDITIONS/OHANGES TO OFFICE	LIIG AID	Change	Addition	CR2E034 (9/96)
NAME	LEE, H. DUNBAR		<u>—</u>		1.2 NAME						4
STREET ADDRESS	ARRA SOLULANDA PROGRAM			1.3 \$	1.3 STREET ADDRESS						띯
CITY-ST-7IP	RUSSELL KY			1.4 0	1.4 CITY - ST - ZIP						Ķ
TITLE	VPF		DELETE	2.1 TITLI					Change	Addition	70
NAME	DANSBY, JOHN W			221	IAME	}					1
STREET ADDRESS 1000 ASHLAND DR			235			ADDRESS					
CITY-ST-ZIP RUSSELL KY						ST-ZIP]
TITLE	VP DELETE 3				3.1 TITLE				Change	Addition	1

RUSSELL KY 6.4 CITY-ST-2IP CITY - \$1 - 7/P 14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 13 of Block 13 of changed, or on an attachment with an address. appears in Block 190

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY - ST-ZIP

3.4. CITY - ST-ZIP

NAS Relie COLDIANTE D. Ellis

DELETE

DELETE

DELETE

1-24-97

606 357-7484

Change

Change

Addition

Addition

Addition

FILED

Feb 03 1997 8:00am

Secretary of State