## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27517

Entity Name: DANT CLAYTON CORPORATION

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1500 BERNHEIM LANE LOUISVILLE, KY 40210						
Current Mailing Address:			New Maili	New Mailing Address:		
1500 BERNHEIM LANE LOUISVILLE, KY 40210						
FEI Number: 61-0947342 FEI Number Applied For ( ) FEI Number			Number Not Appl	nber Not Applicable ( ) Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US						
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:			ADDITION	NS/CHANGES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	PRES () C WILLIAMS, KEITI 5979 EAST SR 6 PEKIN, IN 47165	0	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	V ()E HUTTON, TATE 5100 UNDERHILI LOUISVILLE, KY		Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition HUTTON, TATE 5100 UNDERHILL CT LOUISVILLE, KY 40207		
Title: Name: Address: City-St-Zip:	S () E GUTKNECHT, SA 1465 HWY 64 NE RAMSEY, IN		Title: Name: Address: City-St-Zip:	SECR (X) Change ( ) Addition GUTKNECHT, SANDRA 1465 HWY 64 NE RAMSEY, IN		
Title: Name: Address: City-St-Zip:	VPEN (X) [ WARREN, KATHI 1601 KEEVER C LOUISVILLE, KY	OURT	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	CEOC () E MERRICK, BRUC 5803 GLEN PARI LOUISVILLE, KY	KRD	Title: Name: Address: City-St-Zip:	CHAI (X) Change ( ) Addition MERRICK, BRUCE C 5803 GLEN PARK RD LOUISVILLE, KY 40222		
Title: Name: Address: City-St-Zip:	VPF () E WOOSLEY, ALLI 713 LOCUST PO LOUISVILLE, KY	INTE PLACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		

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: SANDRA GUTKNECHT SECR 02/04/2009