


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P28599
 1. Entity Name
 R. AND P. INDUSTRIAL CHIMNEY CO., INC.



Principal Place of Business
 244 INDUSTRY PKWY.
 NICHOLASVILLE, KY 40356

Mailing Address
 244 INDUSTRY PKWY.
 NICHOLASVILLE, KY 40356

DO NOT WRITE IN THIS SPACE



02232004 No Chg-P CR2E034 (10/03)

4. FEI Number
 61-0846774

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000081430
 03/08/04-80149-022 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRESTON, DANNY R. 265 PARADISE CAMP ROAD HARRODSBURG, KY 40330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARTY, JOHN J 3943 BOSTON ROAD LEXINGTON, KY 40514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV PRESTON, ROBERT J. 350 N COLLEGE STREET HARRODSBURG, KY 40330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MONTGOMERY, THOMAS V 1264 LORETTO RD SPRINGFIELD, KY 40069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WADE, KENNETH R 1015 MAN O WAR DRIVE FRANKFORT, KY 40601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE Kenneth R. Wade **KENNETH R. WADE** 2-23-04 859-887-2265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #