2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2014
Secretary of State
CC5541820297

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Entity Name: SEREDOR CORPORATION

Current Principal Place of Business:

500 W. MAIN STREET
LOUISVILLE, KY 40202

Current Mailing Address:

P.O. BOX 740026
TAX DEPARTMENT
LOUISVILLE, KY 40201-7426 US

FEI Number: 27-0338595

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Officer/Director Detail :

Title	PRESIDENT AND CEO
Name	DEMARQUETTE, KENT
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VICE PRESIDENT
Name	BAUERNFEIND, GEORGE G.
Address	500 W MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	ASST. SECRETARY
Name	VENTURA, JOSEPH C.
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	DIRECTOR
Name	MURRAY, JAMES E.
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	INTERIM CFO
Name	MCCULLEY, STEVEN
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VP AND CORPORATE SECRETARY
Name	LENAHAN, JOAN O.
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	DIRECTOR
Name	BROUSSARD, BRUCE D.
Address	500 W. MAIN STREET
City-State-Zip:	LOUSIVILLE KY 40202

Title	SENIOR VP
Name	LECLAIRE, BRIAN P.
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: GEORGE BAUERNFEIND VICE PRESIDENT 03/06/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	VP
Name	LAMBERT, CHARLES F. III
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	VP
Name	WILSON, RALPH M.
Address	500 W. MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202

Title	DIRECTOR
Name	BEVERIDGE, ROY
Address	500 W MAIN STREET
City-State-Zip:	LOUISVILLE KY 40202