## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000010463

Entity Name: CDO 1, LLC

Apr 15, 2021 **Secretary of State** 6311324861CC

**FILED** 

## **Current Principal Place of Business:**

500 WEST MAIN STREET LOUISVILLE, KY 40202

## **Current Mailing Address:**

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

FEI Number: 35-2608414 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Title

Electronic Signature of Registered Agent

Title

Authorized Person(s) Detail:

MANAGER

ASSOCIATE VICE PRESIDENT, Title Title VICE PRESIDENT AND TREASURER

ASSISTANT GENERAL COUNSEL AND Name BAILEY, ALAN J

CORPORATE SECRETARY Address 500 WEST MAIN STREET

Name RUSCHELL, JOSEPH M LOUISVILLE KY 40202 City-State-Zip: Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

MANAGER, PRESIDENT Name BUCKINGHAM, RENEE J

500 WEST MAIN STREET Address Name BROUSSARD, BRUCE D

City-State-Zip: LOUISVILLE KY 40202 Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202 Title SENIOR VICE PRESIDENT, TAX

Name ROBINSON, D HANK Title **MANAGER** 

Address 500 WEST MAIN STREET Name KANE, BRIAN A MD

City-State-Zip: LOUISVILLE KY 40202 Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

ASSOCIATE VICE PRESIDENT, Title

**DIVISION FINANCE** Name JUDD, PATRICK N

Address 500 WEST MAIN STREET

LOUISVILLE KY 40202 City-State-Zip:

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SENIOR VICE PRESIDENT 04/15/2021 SIGNATURE: D HANK ROBINSON

Electronic Signature of Signing Authorized Person(s) Detail

Date

Date