Organization ID # 0058009 State of origin

## Commonwealth of Kentucky Filing fee \$15.00 Alison Lundergan Grimes, Secretary of State



Alison Lundergan Grimes Secretary of State P. O. Box 1150 Frankfort, KY 40602-1150 (502) 564-3490 http://www.sos.ky.gov

## 2017 Annual Report Due June 30, 2017

**ARP** 

**Exact organization name and principal office address** 

FRITZ VARIETY, INC. 1201 B SOUTH GREEN ST **HENDERSON KY 42420** 

The principal office address and registered agent name/office address cannot be changed on this form. You can file online at app.sos.ky.gov/ftsearch or forms can be downloaded from our website.

Registered Agent and Registered Office Address

PAUL A. FRITZ 1201 B SOUTH GREEN ST. HENDERSON, KY 42420

Sole Officer	PAUL A FRI	TZ				S Maria	
Directors - List the name rector addresses default to the			No listing of directors is	verification that	the corporatio	on has dispensed with directors. If not specified	
	n san begilled	Japan (j. 1919)		a la est	¥1		
				1 1	r Merc		
Please indicate the co	ounty in which yo	ur business ope	rates:				
	ounty in which yo )と尽る が、C	•	rates:				
	)ERSON, C	OUNTY	rates: - ollowing, please sh	ade the box	completel	<b>y.</b>	
Please indicate the si	) ERSON, C	complete the forms:	- ollowing, please st	ny of the fo		y. ke up more than fifty percent (50%)	
Please indicate the si	) と R So ル , C To ize of your busine	complete the forms:	- ollowing, please sh indicate whether a	ny of the fo		ke up more than fifty percent (50%)	
Please indicate the si	To ize of your busine than 50 employees nore employees)	complete the foress: Please your bu	ollowing, please sh indicate whether a usiness ownership Women-Owned	ny of the fo	llowing ma	ke up more than fifty percent (50%)	
Please indicate the si Small (Fewer Large (50 or n	To ize of your busine than 50 employees nore employees)	complete the forms: Please your but best describes y	ollowing, please shindicate whether a usiness ownership Women-Owned	ny of the fo	llowing ma	ke up more than fifty percent (50%)  Minority-Owned	
Please indicate the set Small (Fewer Large (50 or no Please indicate which Agriculture	To ize of your busine than 50 employees nore employees)	COUNTOCOMPLETE THE FORMATION OF THE PROPERTY O	ollowing, please shindicate whether a usiness ownership Women-Owned rour business:	rny of the for:  Volume	eteran-Owr	ke up more than fifty percent (50%)  ed Minority-Owned  estruction	
Please indicate the si Small (Fewer Large (50 or n  Please indicate which Agriculture Wholesale Tra	To ize of your busine than 50 employees nore employees)	complete the formula complete	pillowing, please shindicate whether a usiness ownership Women-Owned rour business:  Service Manu	eny of the for:  Volume  Des [ facturing [	eteran-Owr	ke up more than fifty percent (50%)  Minority-Owned  Instruction  Jance, Insurance, Real Estate	
Please indicate the set Small (Fewer Large (50 or no Please indicate which Agriculture	To ize of your busine than 50 employees nore employees)	complete the formula complete	ollowing, please shindicate whether a usiness ownership Women-Owned rour business:	eny of the for:  Volume  Des [ facturing [	eteran-Owr	ke up more than fifty percent (50%)  Minority-Owned  Instruction  Jance, Insurance, Real Estate	

TO AVOID A PENALTY FEE OF \$100, SAVE TIME, FILE ONLINE: http://app.sos.ky.gov/arp/0058009 OR sign and return to the Office with the required \$15.00 filing fee no later than June 30, 2017

- Confirm the information is correct.
- Make changes by writing on this annual report, or by submitting an attachment with the signed report.
- The signed annual report, any attachments and filing fee (payable to the Kentucky State Treasurer) must be received in the Office by June 30, 2017
- If filing online, do not return this annual report or submit payment.