

Org ID:
0597609



60 Day Notice Annual Report
July 15, 2015

State: AL Fee: \$15.00

0597609

Must be received by September 11, 2015
RIVES, LEAVELL & CO., INC.

Shaded items cannot be changed on this card.

Principal Office 1430 LELIA DR., JACKSON MS 39216

Registered Agent C T CORPORATION SYSTEM, 306 W MAIN ST, SUITE 512, FRANKFORT KY 40601

List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. Addresses default to principal office unless otherwise specified.

President ROLAND LEAVELL

Secretary SID ROBINSON

Treasurer SID ROBINSON

Vice President STEPHEN SOMSON

List the name and address of all directors (if applicable):

Director ROLAND LEAVELL

Director LISA LEAVELL

Avoid having to re-qualify. File online at <http://app.sos.ky.gov/arp/0597609> OR sign and return the required \$15.00 filing fee no later than Sept. 11, 2015.

I hereby certify that I am authorized to submit this annual report, and I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct as of today.

X

Signature of officer or chairman of the board (Required)

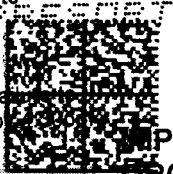
Title (Required)

Date (Required)



Alison Lundergan Grimes
 Kentucky Secretary of State
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 Frankfort, KY 40602-1150
 (502)564-3490

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Final Reminder! File to avoid penalty. Failure to file your annual report by Sept. 11, 2015, by (EST) will result in revocation of authority.

IMPORTANT NOTICE 9 2015

MAILED FROM ZIP CODE 40601

File Online: <http://app.sos.ky.gov/arp/0597609>

ORG ID: 0597609

To file via mail:

- Officer addresses default to principal office unless otherwise specified.
- If filing and paying online, do not return this card or submit payment by mail.
- Changes to the principal office or registered agent/address **CANNOT** be made on the card. You must file a statement of change.
- Make subm postc
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