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COMMONWEALTH OF KENTUCKY  
JOHN Y. BROWN III, SECRETARY OF STATE  
ANNUAL REPORT

RECORD # 0032310

DUE JUNE 30,

2000

(4) FILING FEE

\$15.00

(1) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

LOUISVILLE #6, UNIT 1100, INC.  
10219 LINN STATION RD.  
LOUISVILLE, KY 40223

RECEIVED

JUN 15 2000

SECRETARY OF STATE  
COMMONWEALTH OF KENTUCKY

(5) STATE OR COUNTRY OF INCORPORATION

KY

(2) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO

[Empty box for principal office address change]

(6) DATE OF INCORPORATION OR DATE  
AUTHORIZED TO TRANSACT BUSINESS

12/12/1968

(3) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS

Changes made to the registered agent or registered office cannot be made on this form.  
Complete (7) to request a form to be mailed or download form from web site.

DAN J. ORANGIAS  
10219 LINN STATION RD.  
LOUISVILLE, KY 40223

(7) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO

[Empty lines for mailing statement of change of agent or office to]

(8) PRINCIPAL OFFICERS If the corporation has previously filed an annual report, verify the names & titles of officers listed below. Please note any additions to or changes in the principal officers and give the address for each person listed. If (8) is blank, type or print the names & business addresses of the current principal officers. If sole officer, please note.

President	Al Gatti	Address	GATTI • MARTINO • ORANGIAS
Vice President	Dan Orangias	Address	McDonald's of Greater Louisville
Secretary	Larry Gatti	Address	10219 Linn Station Road
Treasurer	Bill Gatti	Address	Louisville KY 40223
		Address	
		Address	

(9) DIRECTORS Type or print the names and business addresses of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors. Nonprofit corporations must list three (3) or more directors.

Name	Address
Name	Address
Name	Address
Name	Address

I VERIFY THAT INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

*Al Gatti*  
Signature of Officer or Chairman of the Board

TITLE

*President*

DATED

*4/16*