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## COMMONWEALTH OF KENTUCKY TREY GRAYSON, SECRETARY OF STATE ANNUAL REPORT DUE JUNE 30, 2006



ORGANIZATION ID # 0077239

STATE OR COUNTRY OF INCORPORATION

KY

ORGANIZATION

12/21/1976

FILING FEE \$15.00

TIMOTHY, HAIRDRESSERS, INC. 3381 TATES CREEK RD. LEXINGTON, KY 40502  FEB 2 4 2008 SECRETARY OF STATE COMMONWEALTH OF STATE COMMONWEALTH OF STATE COMMONWEALTH OF STATE SCREEK RD. LEXINGTON, KY 40502  CHARGESTERED AGENT AND REGISTERED OFFICE ADDRESS Charges made to the registered agent or registered diffice cannot be made on this form. Complete (4) to request a form to be mailed or download form from web sito.  ALVIE THURMAN JOHNSON 3381 TATES CREEK RD. LEXINGTON, KY 40502  (A) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO  SPRINCIPAL OFFICERS If (5) is blank, type or print the names and business addresses of the current principal officers. If soln officer, please note. The annual report will be returned if business addresses are not listed. If the corporation has previously filed an annual report, verify the names and titles of officers islade below. Please note any additions to or charges in the principal officers and give the business addresses of reach person listed.  Secretary Evelyn Johnson Bell Treasurer Teress Johnson  Vice President Alan Garrett  Address  Name  Address  Add		
TIMOTHY, HAIRDRESSERS, INC. 3381 TATES CREEK RD. LEXINGTON, KY 40502  **COMMONWEALTH OF KY  **COMMONWEALTH OF	(1) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE	E ADDRESS
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Treasurer Teresa Johnson  Vice President Alan Garrett  President Alvie Thurman Johnson  Address	be returned it business addresses are not listed. If the corporation has previously	ly filed an annual report, verify the names and titles of officers listed below. Please note
Vice President Alan Garrett  President Alvie Thurman Johnson  Address	Secretary Evelyn Johnson Bell	1001 Evene Stut Merdeto Jen
President Alan Garrett  President Alvie Thurman Johnson  Address  Name  Address  Name  Address  Name  Address	Treasurer Teresa Johnson	Address 1001 Evena Strat Manhet Der
Address  Address  6) 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 d (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directors (KRS 273.211). The annual report will be returned if business addresses are not listed.  Name  Address	Vice President Alan Garrett	Address 1449 Lakewood Leepingtor 40502
6) 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 d (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directors (KRS 273.211). The annual report will be returned if business addresses are not listed.  Name  Address  Name  Address  Name  Address  Name  Address  C7) Check here if you are a cooperative corporation or association organized under KRS 272.	President Alvie Thurman Johnson	1449 Takewood Terforgh 40502
Name  Address	<del></del>	Address
Name Address  Name Address  Address  (7) Check here if you are a cooperative corporation or association organized under KRS 272.	6) DIRECTORS Type or print the names and business addresses of the corpor (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directions.	ration's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 273.211). The annual report will be returned if business addresses are not listed.
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(7) Check here if you are a cooperative corporation or association organized under KRS 272. Check here if you are a rural electric or rural telephone cooperative corporation organized under KRS 279.	Name	Address
VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.	Check here if you are a rural electric or rural telephone cooperate VERIFY THAT THE INFORMATION IN THIS ANNUAL REPOR	RT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.
Signature of Officer or Chairman of the Board  Type or Print Name  Title  Date	Signature of Officer or Chairman of the Board  Typ	pe or Print Name Title Date

ANNUAL REPORT AND FILING FEE

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

**MAILING ADDRESS** 

Trey Grayson Secretary of State P O Box 1150 Frankfort, KY 40602-1150 OFFICE LOCATION

(502)-564-2848

Secretary of State State Capitol, Room 154 700 Capital Avenue Frankfort, KY 40601 NOTE: P O Box 1150 is for annual report filings only.