



Alison Lundergan Grimes  
Secretary of State  
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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**

ROCK CREEK RIDING CLUB, INC.  
3114 ROCK CREEK DR  
LOUISVILLE KY 40207

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](http://app.sos.ky.gov/ftsearch) or forms can be downloaded from our website.

**Registered Agent and Registered Office Address**

DAVID MOUNT  
3114 ROCK CREEK DRIVE  
LOUISVILLE, KY 40207

**Principal Officers** - 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. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

President	DAVID MOUNT	_____
Treasurer	ROBIN ROGERS	_____
Secretary	GAIL KLINE	_____

**Directors** - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address.

DAVID MOUNT	_____
ROBIN ROGERS	_____
GAIL KLINE	_____
MOZELLE ANSON	_____
MICHAEL JUDAH	_____

Please indicate the county in which your business operates:

County: Jefferson

To complete the following, please shade the box completely.

Please indicate which of the following best describes your business:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Agriculture           | <input type="checkbox"/> Mining   | <input type="checkbox"/> Services      | <input type="checkbox"/> Construction                    |
| <input type="checkbox"/> Wholesale Trade       | <input type="checkbox"/> Retail Trade   | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, Real Estate |
| <input type="checkbox"/> Public Administration | <input type="checkbox"/> Transportation, Communications, Electric, Gas, Sanitary Services |  |  |
| <input type="checkbox"/> Other                 |   |  |  |

X Robin Rogers  
Signature of officer or chairman of the board (Required)

Treasurer  
Title (Required)

3/7/17  
Date (Required)

TO AVOID A PENALTY FEE OF \$100, SAVE TIME, FILE ONLINE: <http://app.sos.ky.gov/arp/0044565> OR sign and return to the Office with the required \$15.00 filing fee no later than June 30, 2017

To file via mail:

- 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.