0606565



60 Day Notice Annual Report July 11, 2012

State: NY Fee: \$15.00

0606565

Must be received by September 9, 2012 MEDLEY'S AUTO CARE, INC.

Shaded items cann	not be changed on this card.		
Principal Office	4209 OUTER LOOP, LOUISVILL	F KY 40219	
Registered Agent	SHARON LAWSON, 4209 OUT	ER LOOP, LOUISVILLE KY 4021	9
List the name, add	ress and title of all current officers officer. Addresses default to princi	. All organizations must list at	least one (1) officer aven in
Sole Officer	SHARON LAWSON		
Secretary			
			** 1.36 68 1
			
List the name and a	address of all directors (if applicat	sie)	1
	- The state of the		
•			
Avoid a penalty	fee of \$100. File online at ht	tn://ann.sos.kv.gov/arn/06	CORECE OD
sign and return	the required \$15.00 filing fee	no later than Sent 0 20	100303 <u>OK</u>
The state of	Gagara da Toron Hilling Ter	a no later gian Sept. 9, 20	12.
X /VU6	1 Kim to	Pata	CH Llan
Signature of office	er or chailman of the board (Required)	Title (Required)	