

Organization ID # 0167897
State of origin KY
Filing fee \$15.00

Commonwealth of Kentucky

Alison Lundergan Grimes, Secretary of State



Alison Lundergan Grimes
Secretary of State
P. O. Box 1150
Frankfort, KY 40602-1150
(502) 564-3490
<http://www.sos.ky.gov>

2019 Annual Report

Due June 30, 2019
Filing Fee \$15.00

ARP

Exact organization name and principal office address

FINANCIAL CONCEPTS GROUP, INC.
10431 COVERED BRIDGE ROAD
PROSPECT KY 40059

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 or forms can be downloaded from our website.

Registered Agent and Registered Office Address

BTH INC.
400 WEST MARKET STREET
32ND FLOOR
LOUISVILLE, KY 40202-3363

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	JOSEPH B SCHILDT	_____
Vice President	H HEWETT BROWN	_____
_____	_____	_____
_____	_____	_____

Directors - List the name And address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If Not specified, director addresses default to the principal office address.

JOSEPH B SCHILDT	_____	_____
H HEWETT BROWN	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate the county in which your business operates:
County: _____

If any information below has changed, please place an "X" in the appropriate boxes.

Please indicate the size of your business:	Please indicate whether any of the following make up more than fifty percent (50%) of your business ownership:
<input type="checkbox"/> Small (Fewer than 50 employees)	<input type="checkbox"/> Women-Owned
<input type="checkbox"/> Large (50 or more employees)	<input type="checkbox"/> Veteran-Owned
	<input type="checkbox"/> Minority-Owned

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		
Signature of officer Or chairman of the board (Required)	Title (Required)	Date (Required)

TO AVOID A PENALTY FEE OF \$100, SAVE TIME, FILE ONLINE: <http://app.sos.ky.gov/arp/0167897> OR sign and return to the Office with the required \$15.00 filing fee no later than June 30, 2019.

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, 2019**
- If you file and pay online, do not return this document to the Secretary of State.