## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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|--|---------------------|---|------------------------------------|-----|--|
| Alison Lundergan Grimes<br>Secretary of State<br>P. O. Box 1150<br>Frankfort, KY 40602-1150<br>(502) 564-3490<br>http://www.sos.ky.gov |                     | Annual Report<br>Online Filing  |                                    | ARP |  |
| Company:<br>Company ID:<br>State of origin:<br>Formation date:<br>Date filed:<br>Fee:  | 0<br> k<br> 8<br> 6 | A & B PAWN, IN<br>0644236<br>Kentucky<br>8/3/2006 12:00:0<br>5/30/2016 3:33:5<br>615.00 | 00 AM                              |     |  |
| Principal Office   |                     |   |                                    |     |  |
| 125 NORTH PUBL   | IC SQUARE           | -///  |                                    |     |  |
| GLASGOW, KY 42141  |                     |   |                                    |     |  |
|  |                     |   |                                    |     |  |
| Registered Agent Name/Address  |                     |   |                                    |     |  |
| KIMBERLY D. HAY<br>125 NORTH PUBL<br>GLASGOW, KY 42  | IC SQUARE           |   |                                    | 0   |  |
| Current Officers   |                     |   |                                    |     |  |
| President  | Kimberly D. H       | layes   | 125 N Public Sq Glasgow,KY 42141   |     |  |
| Vice President   | Becca Hayes         |   | 125 N. Public Sq. Glasgow, KY 421  |     |  |
| Directors  |                     |   |                                    |     |  |
|  | Kinch only D. L     |   | 105 N Dublic Co Classour I/V 40444 |     |  |
| Director   | Kimberly D. H       | layes   | 125 N Public Sq Glasgow, KY 42141  | V   |  |
| Signatures   |                     | 162.731   | Startes 250/                       |     |  |
| Signature  | ĸ                   | IMBERLY HAY   | FS                                 |     |  |
| Title  |                     | PRESIDENT   |                                    |     |  |
|  | •                   |   |                                    |     |  |