## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## **Statement of Change of Principal Office Address**

**POC** 

**NPOC** 

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

## TAYLOR COUNTY TENNIS ASSOCIATION, INC.

which is organized in the state of Kentucky, and for that purpose submits the following statements:

1. Address of current principal office	2. Principal office is hereby changed to:
353 ELMORE ROAD CAMPBELLSVILLE, KY 42719	PO BOX 471 CAMPBELLSVILLE, KY 42719
3. Signature of officer or chairman of the board	
Sherry Shanks, Treasurer Signature and Title	
Type or print name and title	E SI SA Y
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Date	