

# Kentucky Secretary of State Annual Report

**This Annual Report was submitted electronically**

**Company** AUTOINSURANCE NETWORK, INC.  
**Company ID** 0302952.09.99999  
**Date Filed** 6/28/2005  
**Fee** \$15.00

## **Principal Office**

894 MCMEEKIN PLACE  
LEXINGTON, KY 40502

## **Registered Agent**

DANIEL R. BARKER  
894 MCMEEKIN PLACE  
LEXINGTON, KY 40502

## **Officers**

Sole Officer	Daniel R Barker	894 McMeekin Place, Lexington, Ky. 40502
--------------	-----------------	--

## **Signatures**

**Signature** Daniel R. Barker  
**Title** President