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COMMONWEALTH OF KENTUCKY
TREY GRAYSON, SECRETARY OF STATE
ANNUAL REPORT
DUE JUNE 30, 2005

0545660

ORGANIZATION ID #	STATE OR COUNTRY OF INCORPORATION	ORGANIZATION DATE	FILING FEE
0545660	KY	10/03/2002	$15.00

(1) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

LOGICHOME, INC.
628 CARDIFF LANE
LEXINGTON, KY 40503

RECEIVED
APR 18 2005
SECRETARY OF STATE
COMMONWEALTH OF KY

(3) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO

LOGICHOME, INC.
103 ~~SANDA~~ SANDPIPER CT.
MIDWAY, KY 40347

(2) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS
Changes made to the registered agent or registered office cannot be made on this form. Complete (4) to request a form to be mailed or download form from web site.

MICHAEL S. WILSON
628 CARDIFF LANE
LEXINGTON, KY 40503

(4) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO

MICHAEL S. WILSON
103 SANDPIPER CT.
MIDWAY, KY 40347

(5) PRINCIPAL OFFICERS If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and **give the business address** for each person listed. If (5) is blank, type or print the **names and business addresses** of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed.

Treasurer	Michael S Wilson	Address
President	Michael S Wilson	Address
Secretary	Michael S Wilson	Address
		Address
		Address

(6) DIRECTORS Type or print the **names and business addresses** of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 271B.8-010(3)). **Nonprofit corporations must list three (3) or more directors** (KRS 273.211). The annual report will be returned if business addresses are not listed.

Name	Address
Name	Address
Name	Address
Name	Address

(7) Check here if you are a cooperative corporation ☐

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

Michael S Wilson **TITLE** President **DATED** 4-9-05
Signature of Officer or Chairman of the Board

ANNUAL REPORT AND FILING FEE
Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the ***"Kentucky State Treasurer". Please do not send cash.***

MAILING ADDRESS
Trey Grayson
Secretary of State
P O Box 1150
Frankfort, KY 40602-1150

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Frankfort, KY 40601
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Secretary of State
363 Versailles Road
Frankfort, KY 40601
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NOTE: P O Box 1150 is for annual report filings only.