



2520061570317

MacLellan Integrated Services
3120 Wall Street, Suite 100
Lexington, Kentucky 40513

Alternative Reporting And Disclosure Statement For Nonqualified Deferred Compensation Plans

Tel: 859.219.5400
Fax: 859.219.5438

To: Top Hat Plan Exemption
Employee Benefits Security Administration
Room N 1513
U.S. Department of Labor
200 Constitution Ave. N.W.
Washington, DC 20210

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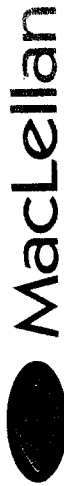
In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: MacLellan Integrated Services Inc.
2. The mailing address of the Employer is: 3120 Wall Street, Suite 100
Lexington, KY 40513
3. The Employer Identification Number is: 38-2510037
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:
One Plan covering 10 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Pension and Welfare Benefit Program upon request.

MacLellan Integrated Services Inc.
A Delaware Corporation

By: [Signature], Treasurer
Authorized Person

Dated: March 21, 2006



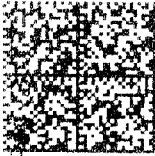
3120 Wall Street, Suite 100 • Lexington, Kentucky 40513

REGISTERED MAIL

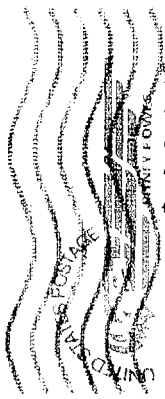
LEXINGTON KY 405



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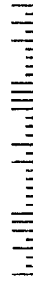
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MAILED FROM ZIP CODE 40513


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 200 Consitution Ave. NW
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