Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

Alison Lunderg Secretary o P. O. Box Frankfort, KY 4 (502) 564 http://www.so	of State 1150 0602-1150 -3490	Annual Report Online Filing	ARP
Company: Company ID: State of origin: Formation date: Date filed: Fee:	0418549 Kentucky 7/9/1996	SITY OF KENTUCKY HOSPITAL AUXILIARY, INC 12:00:00 AM 11:38:19 AM	5.
Principal Office		TEU E SIL ES	
1000 SOUTH LIME ALBERT CHANDLI UNIVERSITY OF K ROOM A.01.129 LEXINGTON, KY 4	ER MEDICAL CTR KENTUCKY 405360293		
Registered Agent	Name/Address		
CLARA WILSON 1000 SOUTH LIME ALBERT CHANDLI UNIVERSITY OF K ROOM A.01.129 LEXINGTON, KY 4	ER MEDICAL CTR KENTUCKY	OUVIDED WE FAIL STA	
Current Officers		DED WE	
President Secretary Vice President	Patty Collins Mary Reynolds Gail Carpenter	same same 1000 S. Limestone, UK Chandler Hospital Lexington, Ky. 40536	I, room A.01.129,
Treasurer	Ruth Berry	same	
	-		
Directors			
Director	Janice Boyd	1000 South Limestone,UK Chandler Hosp Lexington, ky. 40536	pital, room A.01.129,
Director	Ruth Berry	1000 South Limestone	
Director	Patty Collins	1000 South Limestone	
Signatures			
Signature	Katie Tibbitts		
Title	e Manager, Volunteer Services		