COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III, SECRETARY OF STATE ANNUAL REPORT

(See Reverse Side for Filing Instructions)

				(4) FILING FEE
RECORD #	0039259	DUE JUNE 30,	1997	4.00
(1) EXACT C	ORPORATE NAME AND PRINCIPAL OFF	TICE ADDRESS:		**************************************
	HOSPITAL AND SCHOOL CAN AWSON SPRINGS RD.	ITEEN CORPORA	T TON	
DAMSON	SPRINGS, KY 42408-0000			(5) STATE OR COUNTRY OF INCORPORATION
				КА
(2) PRINCIPAL	OFFICE ADDRESS IS HEREBY CHANGED T	o :		(6) DATE OF INCORPORATION OR AUTHORIZATION TO TRANSACT BUSINESS
				12/31/1962
(3) REGISTER	ED AGENT AND REGISTERED OFFICE ADDR	ESS:	(7) PLEASE MAIL	A STATEMENT OF CHANGE FORM TO:
	ENSER AWSON SPRINGS ROAD SPRINGS, KY 42408-0000		REC	2 0 1997 TARY OF STATE TOWENTH OF KY
-	to the registered agent or registered office cannot be See Filing instructions on reverse side. E TYPE OR PRINT THE NAMES AND BUSINE IF SI		HE CORPORATION	
VICE PRESIDE	INT			
SECRETARY _				
	PLEASE TYPE OR PRINT THE NAMES AND UPON THE HISTORY OF THE NAMES AND UPON THE HISTORY OF THE HIS	at the corporation has dispe	ensed with the board of c	
niuzn10 u 3 -	Dorothy Schroeder			ect, Frankfort
-	Anne Richardson			zings Road, Dawson Spaings
_	Terry Revell	110 5	buth Adaus,	Henderson
I VERIFY THAT AUTHORIZED	FINFORMATION IN THIS ANNUAL REPORT I	S CURRENT AS OF TH	ie date this repo	ORT IS EXECUTED.
PROFESSION/ addresses of al I, Pre secre	AL SERVICE CORPORATIONS ONLY: In additi-	pration and the president PROFESSIONAL SERVI the shareholders, not lead propression are duly qualifi	content requirement, nt shall sign the certiful ICE CORPORATION ss than one half of the fied as provided in KF	there shall be included a list of names and licate below. The directors, and all officers other than all copy of such annual

PRESIDENT'S SIGNATURE