

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

NARP

0526209

Michael G. Adams  
KY Secretary of State

Received and Filed  
3/3/2020 3:46:16 PM  
Fee receipt: \$15.00

Michael G. Adams  
Secretary of State  
P. O. Box 1150  
Frankfort, KY 40602-1150  
(502) 564-3490  
<http://www.sos.ky.gov>

Annual Report  
Online Filing

ARP

**Company:** VOAKY AUTUMN RIDGE, INC.  
**Company ID:** 0526209  
**State of origin:** Kentucky  
**Formation date:** 11/29/2001 12:00:00 AM  
**Date filed:** 3/3/2020 3:46:16 PM  
**Fee:** \$15.00

**Principal Office**

570 S. FOURTH STREET  
SUITE 100  
LOUISVILLE, KY 40202

**Registered Agent Name/Address**

JENNIFER HANCOCK  
570 S. FOURTH STREET  
SUITE 100  
LOUISVILLE, KY 40202

**Current Officers**

|           |                  |                                                       |
|-----------|------------------|-------------------------------------------------------|
| CFO       | THOMAS O GEORGE  | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |
| President | JENNIFER HANCOCK | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |

**Directors**

|          |                  |                                                       |
|----------|------------------|-------------------------------------------------------|
| Director | JENNIFER HANCOCK | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |
| Director | THOMAS O GEORGE  | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |
| Director | CHRIS WARD       | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |
| Director | CINDY READ       | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |
| Director | DAVID FENNELL    | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |
| Director | MELANIE MCCOY    | 570 S. FOURTH STREET, SUITE 100, LOUISVILLE, KY 40202 |

|                |                 |
|----------------|-----------------|
| County:        | Boone           |
| Business size: | Large           |
| Business type: | Social Services |

**Signatures**

|           |                 |
|-----------|-----------------|
| Signature | JAMIE PILLSBURY |
| Title     | CONTROLLER      |