

**Commonwealth of Kentucky  
Trey Grayson, Secretary of State**

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NPOC

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Secretary of State  
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**Statement of Change of  
Principal Office Address**

**POC**

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the principal office on behalf of

**OWENSBORO COMMUNITY HEALTH NETWORK, INC.**

which is organized in the state of Kentucky, and for that purpose submits the following statements:

**1. Address of current principal office**

P O BOX 1595  
OWENSBORO, KY 42302-1595

**2. Principal office is hereby changed to:**

811 EAST PARRISH AVENUE  
OWENSBORO, KY 42303

**3. Signature of officer or chairman of the board**

JEFF BARBER, PRESIDENT

Signature and Title

Type or print name and title

2/12/2009 4:46 PM

Date