

Organization ID # 0183067
State of origin KY
Filing fee \$115.00

Commonwealth of Kentucky
Trey Grayson, Secretary of State

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PRPF
Trey Grayson, Secretary of State
Received and Filed:
12/2/2010 1:20 PM
Fee Receipt: \$115.00

Trey Grayson
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Reinstatement Application and
Reinstatement Annual Report
For the year 2010

RST

Exact professional service corporation name and principal office address

FAMILY PHYSICIAN ASSOCIATES, P.S.C.
515 HOSPITAL DR.
SHELBYVILLE KY 40065

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

JAMES R. SMITH, M.D.
515 HOSPITAL DR.
SHELBYVILLE, KY 40065

Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer.

Secretary	EDWARD SAMES	313 COMANCHE SHELBYVILLE KY 40065
President	JAMES SMITH	2585 ZARING MILL RD SHELBYVILLE KY 40065
Vice President	DAVID JONES	2191 HARPER'S FERRY RD LOCKPORT KY 40036

Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors.

DAVID WALLACE	1237 TROON CAT SHELBYVILLE KY 40065
EDWARD SAMES	313 COMANCHE SHELBYVILLE KY 40065
DAVID A JONES	2191 HARPER'S FERRY RD LOCKPORT KY 40036
JAMES R SMITH	2585 ZARING MILL RD SHELBYVILLE KY 40065

Shareholders - List the name and address of the corporation's shareholders.

EDWARD SAMES	313 COMANCHE SHELBYVILLE KY 40065
DAVID WALLACE	1237 TROON COURT SHELBYVILLE KY 40065
JAMES SMITH	2585 ZARING MILL RD SHELBYVILLE KY 40065
DAVID JONES	2191 HARPER'S FERRY RD LOCKPORT KY 40036
KENNETH A. GARDNER	152 SHELBY'S PLACE SHELBYVILLE KY 40065

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 271B.14-210. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to FAMILY PHYSICIAN ASSOCIATES, P.S.C. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X James R. Smith President 12-2-10
Signature of officer or chairman of the board (Required) Title (Required) Date (Required)

Certificate of Professional Service Corporation

I, president of said corporation, certify that all the shareholders, not less than half of the directors, and all officers other than secretary and treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 and a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this certificate.

X James R. Smith
Signature of president of the professional service corporation (Required)



**EDUCATION and WORKFORCE DEVELOPMENT CABINET
OFFICE OF EMPLOYMENT AND TRAINING**

Steven L. Beshear
Governor

Tax Enforcement Branch
275 East Main Street, 2-EH
Frankfort, Kentucky 40621
Phone (502) 564-2272
Fax (502) 564-5442
www.oet.ky.gov

Joseph U. Meyer
Secretary

William Monterosso
Executive Director

Date: 12/02/2010

FAMILY PHYSICIAN ASSOCIATES, P.S.C.

Dear Sir/Madam:

KRS 271B.14-220(1)(e) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

Anthony Hudgins
Division of Unemployment Insurance
275 East Main Street, 2-EH
Frankfort, Kentucky 40621
Phone: (502) 564-2272

Kentucky Secretary of State organization number 0183067



THOMAS B. MILLER
Commissioner

**FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
OFFICE OF INCOME TAXATION**

ELYSE WEIGEL
Deputy Commissioner

DON RICHARDSON
Executive Director

December 2, 2010

**FAMILY PHYSICIAN ASSOCIATES, P.S.C.
515 HOSPITAL DR.
SHELBYVILLE KY 40065**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **FAMILY PHYSICIAN ASSOCIATES, P.S.C.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the professional service corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Dustin Rose, Revenue Auditor I
Division of Corporation Tax
501 High Street, 6th Floor, Sta. 69
Frankfort, KY 40601
502-564-2099
FAX# 502-564-3392

Kentucky Secretary of State organization number 0183067