Kentucky Secretary of State Annual Report

This Annual Report was submitted electronically

Company DIAGNOSTIC TESTING FACILITIES, LLC

Company ID 0590667.06.99999

Date Filed 7/12/2005 **Fee** \$15.00

Principal Office Registered Agent

160 NORTH EAGLE CREEK DRIVE DAVID R. IRVIN

SUITE 202 110 NORTH MAIN STREET LEXINGTON, KY 40509 NICHOLASVILLE, KY 40356

Members / Managers

Manager	KATHLEEN MARTIN	160 NORTH EAGLE CREEK DRIVE, SUITE 202, LEXINGTON, KY 40509
Member	KATHLEEN MARTIN	160 NORTH EAGLE CREEK DRIVE, SUITE 202, LEXINGTON, KY 40509
Member	LAURIE HAAS	160 NORTH EAGLE CREEK DRIVE, SUITE 202, LEXINGTON, KY 40509

Signatures

Signature KATHLEEN MARTIN

Title MANAGER