

Organization ID # 0431075

State of origin KY

Filing fee

\$115.00

# Commonwealth of Kentucky

Elaine N. Walker, Secretary of State

0431075.09

amcray  
PRPF

Elaine N. Walker, Secretary of State

Received and Filed:

10/6/2011 3:37 PM

Fee Receipt: \$115.00

Elaine N. Walker  
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 2011

RST

### Exact professional service corporation name and principal office address

PAIN CONTROL NETWORK, P.S.C.  
6400 DUTCHMANS PKWY  
STE 60  
LOUISVILLE KY 40205

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](http://app.sos.ky.gov/ftsearch) or can be downloaded from our website.

### Registered Agent and Registered Office Address

ELMER E DUNBAR MD  
6400 DUTCHMANS PKWY  
LOUISVILLE, KY 40205

**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. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

#### Sole Officer

ELMER E DUNBAR, MD

Medical Director

Pain Control Network

6400 Dutchmans Pkwy, #60

Louisville, KY 40205

Elmer Dunbar, MD

8502 Westover Dr.

Prospect, Ky, 40059

**Directors** - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address.

#### ELMER E DUNBAR

8502 Westover Dr.  
Prospect, Ky. 40059

**Shareholders** - List the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office address.

#### ELMER E DUNBAR

8502 Westover Dr.  
Prospect, Ky. 40059

The above entity was administratively dissolved on September 10, 2011 because the entity did not file its annual report for the year 2011. 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 PAIN CONTROL NETWORK, 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 Elmer E Dunbar

Signature of officer or chairman of the board (Required)

Medical Director

Title (Required)

10/11/11

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 Elmer E Dunbar

Signature of president of the professional service corporation (Required)



**THOMAS B. MILLER**  
Commissioner

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

**ELYSE WEIGEL**  
Deputy Commissioner

**BOB BROOKS**  
Executive Director

October 6, 2011

**PAIN CONTROL NETWORK, P.S.C.  
6400 DUTCHMANS PKWY  
STE 60  
LOUISVILLE KY 40205**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **PAIN CONTROL NETWORK, P.S.C.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, 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,

Frankie Eden, Revenue Auditor I  
Division of Corporation Tax  
501 High Street, Mail Sta. 69  
Frankfort, KY 40601  
502-564-7394  
FAX# 502-564-3392

Kentucky Secretary of State organization number 0431075



**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](http://www.oet.ky.gov)

**Joseph U. Meyer**  
Secretary

**William Monterosso**  
Executive Director

Date: 10/06/2011

PAIN CONTROL NETWORK, P.S.C.

Dear Sir/Madam:

**KRS 14A.7-030(1)(f) CERTIFICATE**

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

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

Kentucky Secretary of State organization number 0431075