

# Kentucky Secretary of State Annual Report

**This Annual Report was submitted electronically**

**Company** FACIAL REHAB CENTERS OF LOUISVILLE  
PLLC  
**Company ID** 0570676.06.99999  
**Date Filed** 10/27/2004  
**Fee** \$15.00

## **Principal Office**

6909 CHARTWELL COURT  
LOUISVILLE, KY 40241

## **Registered Agent**

BARBARA MORRISON  
6909 CHARTWELL COURT  
LOUISVILLE, KY 40241

## **Members / Managers**

Member	Barbara E Morrison	6909 Chartwell Ct, Louisville, Ky 40241
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## **Signatures**

**Signature** Barbara Morrison  
**Title** Member