

**Commonwealth of Kentucky  
Elaine N. Walker, Secretary of State**

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Elaine N. Walker  
Secretary of State  
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PPOC

Elaine N. Walker  
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

**JERALD M. FORD, M.D., P.S.C.**

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 2527  
1200 BATH AVE.  
SUITE 150  
ASHLAND, KY 41101

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

P.O. BOX 2527  
617 23RD ST.  
MEDICAL PLAZA A, STE. 415  
ASHLAND, KY 41101

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

JERALD M. FORD, M.D., OWNER

Signature and Title

Type or print name and title

5/13/2011 12:03 PM

Date