2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006
Secretary of State

DOCUMENT# F05000007341

Entity Name: PAI OF KENTUCKY, INC.

Current Principal Place of Business:

713 WEST MAIN STREET SUITE 300
LOUISVILLE, KY 40202

New Principal Place of Business:

Current Mailing Address:

713 WEST MAIN STREET SUITE 300
LOUISVILLE, KY 40202

New Mailing Address:

FEI Number: 61-1269919 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CP ( ) Delete
Name: PRESNELL, MICHAEL
Address: 713 W. MAIN STREET SUITE 300
City-St-Zip: LOUISVILLE, KY 40202

Title: VCS ( ) Delete
Name: PRESNELL MADDOX, PATTI
Address: 713 WEST MAIN STREET SUITE 300
City-St-Zip: LOUISVILLE, KY 40202

Title: D ( ) Delete
Name: PRESNELL, TIM
Address: 713 WEST MAIN STREET SUITE 300
City-St-Zip: LOUISVILLE, KY 40202

Title: D (X) Delete
Name: PRESNELL, DAVID III
Address: 713 WEST MAIN STREET SUITE 300
City-St-Zip: LOUISVILLE, KY 40202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL C. PRESNELL CP 02/14/2006

Electronic Signature of Signing Officer or Director Date