

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 60.00 Providence, RI 02904-401.222.

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00

1. Corporate ID No. 000038685	2. Name of Co	rporation		or want therey (30) days	y was more preservoes		
3. Street Address Principa 9901 Linn Statio	al Business Office	<u> </u>	City	State	[7]		
4. Business Phone No.	iii Noau		Louisville	KY	^{Zip} 40223		
502 204 2400			poration		1 40223		
5. Brief Description of the Character of Business Conducted in Rhode Island			nd				
Home Care Service	es	icted in Rhode Island					
. NAMES AND ADI	DRESSES OF THE OVE	ICTRO	_ ' My Seergemen				
resident Name	A PAROLE	ICERS: (A BOX FO	R ATTACHMENT) FILL II	N SPACES BEFORE USIN	G ATTACHMENTS		
Ralph G. Gronefeld, Jr.			· · · · · · · · · · · · · · · · · · ·				
Street Address			Allen Marchetti				
9901 Linn Station	n Road		Street Address				
Жу	State	Zip		9901 Linn Station Road			
Louisville	KY	40223	City	State	Zip		
ecretary Name	***************************************		Louisville	KY	40223		
David S. Waskey			David W. Miles	Treasurer Name			
treet Address							
9901 Linn Station	Road			Street Address			
ity	State	Zip	9901 Linn Station	Road			
ouisville.	KY	40223	City Louisville	State	Zip		
NAMES AND ADD	RESSES OF THE DIRE	CTORS: ("X" BOX FO	PRATTACHMENT) FILL	KY	40223		
irector Name	The state of the s	marandada ar Tabada (17)	Director Name	IN SPACES BEFORE USII	NG ATTACHMENTS		
Ralph G. Gronefel	ld, Jr.		Allen Marchetti				
reet Address			Street Address				
901 Linn Station	Road		9901 Linn Station Road				
ty	State	Zip	City				
ouisville	KY	40223	Louisville	State	Zip		
rector Name		***************************************	Director Name	Į KY	40223		
eet Address			Street Address				
							
	State	Zip	City	State			
officers, a commence				June	Zip		
SHAKES AUTHORIZ	ZED ("X" BOX FOR A	TTACHMENT)	10. SHARES ISSUED	("X" BOX FOR ATTACE	LIMBARATE CO.		
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Gérmas	FOR SEC	RETARY OF	STATE HEE	ONITS	- 1
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Under penalty of perjury, I declar including any accompanying sche contained pergin after true and com-	re and affirm that I have examined this report, edules and statements, and that all statements rect.
Signature	2/11/06 Date
David S. Waskey	<i>Duie</i>
Print or Type Name	
Assistant Secretary	

38685

CNC/Access, Inc. Director and Officers

Name (Last, First Middle)	Title	Business Addres 9901Linn Station Road		
Gronefeld, Jr., Ralph G.	Director & President			
		Louisville	KY	40223
Marchetti, Allen G.	Director & Vice President	9901Linn Station Road		
		Louisville	KY	40223
Miles, David W.	Assistant Treasurer	9901Linn Station Road		
		Louisville	KY	40223
Place, Lynne	Vice President	9901Linn Station Road		
		Louisville	KY	40223
Waskey, David S.	Assistant Secretary	9901Linn Station Road		
		Louisville	KY	40223

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