

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214518497

1.) CORPORATION NAME:

KANAWHA HEALTHCARE SOLUTIONS, INC.

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1383464**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	25,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 W MAIN ST

CITY/ST/ZIP: LOUISVILLE, KY 40202

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	BRUCE D BROUSSARD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	500 WEST MAIN STREET		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 29732		

NAME:	GEORGE BAUERNEFEIND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	500 W MAIN ST		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40202		

NAME:	JOAN O LENAHAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	500 W MAIN ST		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40202		

NAME:	JAMES E MURRAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 W MAIN ST		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40202		

NAME:	BRIAN KANE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP & CFO		
ADDRESS:	500 W MAIN STREET		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40202		

NAME:	STEVEN MCCULLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CAO		
ADDRESS:	500 W MAIN STREET		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40202		

NAME: ROY BEVERIDGE OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 500 W MAIN STREET
CITY/ST/ZIP/CO: LOUISVILLE, KY 40202

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ GEORGE BAUERNFEIND</u>	<u>GEORGE BAUERNFEIND, VICE</u>	<u>4/8/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.