# **Kentucky Secretary of State Annual Report**

# This Annual Report was submitted electronically

**Company** LEBANON FAMILY DENTAL CARE, P.S.C.

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\$15.00 Fee

#### **Principal Office Registered Agent**

219 SOUTH PROCTOR KNOTT AVENUE PHILIP H. ZINK, D.M.D.

LEBANON, KY 40033

219 SOUTH PROCTOR KNOTT AVENUE LEBANON, KY 40033

#### **Officers**

President	PHILIP H ZINK	219 S. PROCTOR KNOTT AVE., LEBANON, KY 40033
Secretary	BARBARA G ZINK	219 S. PROCTOR KNOTT AVE., LEBANON, KY 40033
Treasurer	EMILY M ZINK	219 S. PROCTOR KNOTT AVE., LEBANON, KY 40033
Vice President	PHILIP H ZINK II	219 S. PROCTOR KNOTT AVE., LEBANON, KY 40033

### **Shareholders**

Shareholder	PHILIP H ZINK	219 S. PROCTOR KNOTT AVE., LEBANON, KY 40033
Shareholder	PHILIP H ZINK II	219 S. PROCTOR KNOTT AVE., LEBANON, KY 40033

## **Signatures**

**Signature EMILY M. ZINK** Title **TREASURER**