



BA20250195773

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**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**CORPORATION**

California Secretary of State  
 1500 11th Street  
 Sacramento, California 95814  
 (916) 657-5448

For Office Use Only

**-FILED-**

File No.: BA20250195773

Date Filed: 1/28/2025

Entity Details			
Corporation Name	Kernville Healthcare Inc		
Entity No.	6553171		
Formed In	CALIFORNIA		
Street Address of Principal Office of Corporation			
Principal Address	15859 CALISTOGA AVE BAKERSFIELD, CA 93314		
Mailing Address of Corporation			
Mailing Address	15859 CALISTOGA AVE BAKERSFIELD, CA 93314		
Attention	LORENA ROSAS		
Street Address of California Office of Corporation			
Street Address of California Office	None		
Officers			
Officer Name	Officer Address	Position(s)	
+ RAJESH KHOSLA	5316 BROWN BEAR CT BAKERSFIELD, CA 93311	Chief Financial Officer	
+ NEIL TRIVEDI	12509 GILA RIVER DR BAKERSFIELD, CA 93311	Chief Executive Officer	
+ LORENA ROSAS OJEDA	15859 CALISTOGA AVE BAKERSFIELD, CA 93314	Secretary	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Directors			
Director Name	Director Address		
+ RAJESH KHOSLA	5316 BROWN BEAR CT BAKERSFIELD, CA 93311		
+ NEIL TRIVEDI	12509 GILA RIVER DR BAKERSFIELD, CA 93311		
+ LORENA ROSAS OJEDA	15859 CALISTOGA AVE BAKERSFIELD, CA 93314		
+ JOEL FRIGILLANA	2003 VALEWOOD ST BAKERSFIELD, CA 93311		
The number of vacancies on Board of Directors is: 0			
Agent for Service of Process			
Agent Name	DILIP I PATEL		
Agent Address	1154 E YORBA LINDA BLVD PLACENTIA, CA 92870-3828		

Type of Business Type of Business	PHARMACY
Email Notifications Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Labor Judgment No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.	
Electronic Signature <input checked="" type="checkbox"/> By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.	
<i>RAJESH KHOSLA</i> _____ Signature	01/28/2025 _____ Date