Edgar Filing: ORION HEALTHCORP INC - Form 25

ORION HEALTHCORP INC Form 25 November 29, 2007

> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D. C. 20549

> > FORM 25

NOTIFICATION OF REMOVAL FROM LISTING AND/OR REGISTRATION UNDER SECTION 12(b) OF THE SECURITIES EXCHANGE ACT OF 1934.

> Commission File Number 001-16587

> > _____

President and

ORION HEALTHCORP, INC.

_____ (Exact name of Issuer as specified in its charter,

and name of Exchange where security is listed and/or registered)

1805 Old Alabama Road, Suite 350, Roswell, Georgia 30076, (678) 832-1800

_____ (Address, including zip code, and telephone number, including area code, of Issuer's principal executive offices)

Class A Common Stock, par value \$0.001 per share _____ (Description of class of securities)

Please place an X in the box to designate the rule provision relied upon to strike the class of securities from listing and registration:

|_| 17CFR240.12d2-2(a)(1)

|_| 17CFR240.12d2-2(a)(2)

|_| 17 CFR240.12d2-2(a)(3)

|_| 17 CFR 240. 12d2-2(a)(4)

|_| Pursuant to 17 CFR 240.12d2-2(b), the Exchange has complied with its rules to strike the class of securities from listing and/or withdraw registration on the Exchange. (1)

|X| Pursuant to 17 CFR 240.12d2-2(c), the Issuer has complied with the rules of the Exchange and the requirements of 17 CFR 240.12d2-2(c) governing the voluntary withdrawal of the class of securities from listing and registration on the Exchange.

Pursuant to the requirements of the Securities Exchange Act of 1934, Orion HealthCorp, Inc. (Name of Issuer or Exchange) certifies that it has reasonable grounds to believe that it meets all of the requirements for filing the Form 25 and has caused this notification to be signed on its behalf by the undersigned duly authorized person.

November 29, 2007	By:	Terrence L. Bauer	Chief Executive Officer
Date		Name	Title

Edgar Filing: ORION HEALTHCORP INC - Form 25

(1) Form 25 and attached Notice will be considered compliance with the provisions of 17 CFR 240.19d-1 as applicable. See General Instructions.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.