

Organization ID # 0721900

State of origin KY

Filing fee \$115.00 Alison Lundergan Grimes, Secretary of State

Commonwealth of Kentucky

0721900.09

amcray
NPRF

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
10/20/2016 12:15 PM
Fee Receipt: \$115.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Reinstatement Application and Reinstatement Annual Report For the year 2016

Exact organization name and principal office address

THE FRIESIAN HORSE ASSOCIATION OF NORTH AMERICA, INC.
4037 IRON WORKS PARKWAY
SUITE 160
LEXINGTON KY 40511-8483

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

JASON TICE
4037 IRON WORKS PARKWAY
SUITE 160
LEXINGTON, KY 40511-8483

Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

President ELIZABETH SHARP

Secretary AMY AUSTIN

Treasurer TIM SHERMAN

Vice President SALLY LAWING

SALLY LAWING

JACK VANDERKOOY

DR. ROSANNE PALERMO

Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address.

GERBEN STEENBEEK

BARB RENICO

JACK VANDERKOOY

The above entity was administratively dissolved on October 1, 2016 because the entity did not file its annual report for the year 2016. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 273.3181. Enclosed is a check in the amount of \$115.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to THE FRIESIAN HORSE ASSOCIATION OF NORTH AMERICA, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X JRT

Signature of officer or chairman of the board (Required)

EXECUTIVE DIRECTOR

Title (Required)

10-18-16

Date (Required)



DANIEL P. BORK
Commissioner

**FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
OFFICE OF INCOME TAXATION**

ELYSE WEIGEL
Deputy Commissioner

October 20, 2016

**THE FRIESIAN HORSE ASSOCIATION OF NORTH AMERICA, INC.
4037 IRON WORKS PARKWAY
SUITE 160
LEXINGTON KY 40511-8483**

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **THE FRIESIAN HORSE ASSOCIATION OF NORTH AMERICA, INC.** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Nicole REVX129, Taxpayer Services Specialist II
Division of Corporation Tax
501 High Street, Mail Sta. 52
Frankfort, KY 40601
502-564-2062
FAX# 502-564-0058

Kentucky Secretary of State organization number 0721900