Organization ID# 0088904 State of origin

Commonwealth of Kentucky Filing fee \$220.00 Alison Lundergan Grimes, Secretary of St

0088904.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 5/5/2014 2:16 PM Fee Receipt: \$220.00

RST

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 years 2007 through 2014

Exact organization name and principal office address

KENTUCKY SOCIETY FOR GASTROINTESTINAL ENDOSCOPY, INC. C/O TREVOR WINTER, MD, PHD UNIVERSITY OF KENTUCKY 800 ROSE ST., ROOM MN 649 **LEXINGTON KY 40536-0298**

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.

The principal office address and registered agent

Registered Agent and Registered Office Address

LUIS R. PENA, MD UNIV. OF KENTUCKY 800 ROSE ST. **ROOM MN 649** LEXINGTON, KY 40536-0298

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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

Vice President	President TREVOR A WINTER, MD. PHD		Deb Flomenhoft, MD Thomas L. Abell, MD Jason Roberts, MD Jason Roberts, MD				
President							
Treasurer							
Secretary JOHN M WO. MD							
office address. TREVOR A WINTER	·	Thomas L Abell, MD	tors of the non-profit must be listed. If not specified, director addresses default to the principal				
LUIS R. PENA. MD JOHN M. WO. MD		Deb Flomenhoft, MD					
		Jason Roberts, MD					
ANTHONY MARTIN	MD						

The above entity was administratively dissolved on December 1, 2007 because the entity did not file its annual report for the year 2007. 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 \$220.00, 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 KENTUCKY SOCIETY FOR GASTROINTESTINAL ENDOSCOPY, 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	Themo (aline	President	(Thans	L alug	April 17, 2014	.
S	ignature of officer or chairman o	f the board (Required)		Title (Required)	Date	e (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

May 5, 2014

KENTUCKY SOCIETY FOR GASTROINTESTINAL ENDOSCOPY, INC. C/O THOMAS L. ABELL, MD 550 S. JACKSON STREET ACB 3RD FL. DIV. OF GASTROENTEROLY HEPATOLOGY AND NUTRITION LOUISVILLE, KY. 40202

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **KENTUCKY SOCIETY FOR GASTROINTESTINAL ENDOSCOPY, 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,

Brad Butcher, Taxpayer Services Specialist II Division of Corporation Tax State Office Building, 501 High Street, Mail Station 52 Frankfort, KY 40601 502-564-8139 ext.42055 FAX# 502-564-0058

Kentucky Secretary of State organization number 0088904

