Organization ID # 0215411 State of origin

Commonwealth of Kentucky Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

0215411.09

dcornish **NPRF**

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 10/26/2016 12:23 PM Fee Receipt: \$130.00

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 2015 through 2016

Exact organization name and principal office address LAKE DREAMLAND HOUSE OF PRAYER, INC. 4803 OVERBROOK DR.

Registered Agent and Registered Office Address

GLENDON EMBREY 7916 WINDGATE DR LOUISVILLE, KY 40291

LOUISVILLE KY 40216

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

specified, officer addresse	s default to the principal office address. Corporati	ns are required to list a Secretary or other officer serving	as records custodian
Chairman	GLENDON A EMBRY		
Chairman	JUDIE P HARPER		·
Secretary	TREVA M EMBRY		
<u>Treasurer</u>	TREVA M EMBRY		
office address.		s. All directors of the non-profit must be listed. If not spec	ified, director addresses default to the principal
GLENDON A EME			
<u>JUDIE P HARPER</u>			
<u>TREVA M EMBRY</u>	<u> </u>		
	*		,

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

The above entity was administratively dissolved on September 12, 2015 because the entity did not file its annual report for the year 2015. 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 \$130.00, 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 LAKE DREAMLAND HOUSE OF PRAYER, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said ∈ntity, please provide a Decla	aration of Power of Attorney with the Reinstatem	ent Application.
If not an officer of said entity, please provide a Declar	Obairment	10/21/16
Signature of officer or chairman of the board (Required)	Title (Required)	Date (Required)
	(··· · · · ·)	. , ,



DANIEL P. BORK
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

October 26, 2016

LAKE DREAMLAND HOUSE OF PRAYER, INC. 4803 OVERBROOK DR. LOUISVILLE KY 40216

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, LAKE DREAMLAND HOUSE OF PRAYER, 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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2099 FAX# 502-564-3392

Kentucky Secretary of State organization number 0215411

