Organization ID # 05 State of origin K Filing fee \$115.00		ommonwo el G. Adar			-	0561512 Michael G. A Kentucky Se	dams cretary of Sta	jclar NPR
Michael G. Ada Secretary of Sta P. O. Box 718 Frankfort, KY 4060 (502) 564-349 http://www.sos.ky	ate F 3 2-0718 0	Reinstatement Application and Reinstatement Annual Report For the year 2020			Received and Filed: 11/23/2020 3:35 PM Fee Receipt: \$115.00			
Exact organization nam P.E.A.C.E. CEN 4210 EAST IND LOUISVILLE K	TER, INC. DIAN TRAIL	ice address			name/office ad form. When rel addresses until reinstatement is	idress cannot be instating, you can the reinstatement s filed, the stateme pp.sos.ky.gov/fts	ot modify the is filed. Once the ent of change can b	
Registered Agent and F REV WAYNE A 4210 EAST IND LOUISVILLE, K If the above company is information here FEIN: Na Principal Officers - List	STEELE SR DAN TRAIL Y 40213 Juded in a parent com a (optional): Ime:	oany's Kentucky ta		disregard	FEIN (Opt		ent a sole officer. If no	·.
specified, officer addresses defau	ult to the principal office add	ress. Corporations are	required to list a	Secretary or other of	ficer serving as	s records custodia	<u>,</u>	
President	WAYNE A STEE							
Secretary	AMY PARKER		<u> </u>		<u></u>	<u> / 2014 </u>		
Treasurer	WAYNE A STEE	LE	<u></u>	All Marine			<u> </u>	
			<u> </u>		wasa. R			
Directors - Non-profit corpo office address.	prations must have at least t	hree (3) directors. All d	lirectors of the no	on-profit must be liste	d. If Not specifi	ed, director addre	sses default to the	principal
BETTY MEADOWS	<u>al al al al</u>	<u> </u>	2 9 8 7 2 2 1			<u></u>		
AMY PARKER		_ <u>~</u>			ranger y			
ROSEMARY STEELE			<u></u>	<u> </u>	<u> </u>			· · · · ·
		<u></u>	T. N.	20		and the second		
••••			<u></u>	ningana ningana ningana ningana na ningana n Ningana na ningana na ni	. <u>K.M.</u>			
The above entity was ad The undersigned states to requirements of KRS 273 Under penalty of perjury, information pertaining to	that the grounds for (3.3181. Enclosed is a the below signed he	dissolution either a check in the an ereby authorizes	2020 becau did not exist ount of \$11 the Kentucky	se the entity did or have been e 5.00, payable to v Department of	liminated, a Kentucky S Revenue to	and the entity's State Treasure o release any	s name satisfi er. applicable tax	es the

-220. officer of said entity deese profide a Declaration of Power of Attorney with the Reinstatement Application. If not an

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Х DRESIDEN 16/20 [[Date (Required

Signature of officer Or chairman of the board (Required)

Title (Required)

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P.E.A.C.E. CENTER, INC. 4210 EAST INDIAN TRAIL LOUISVILLE KY 40213

Notice Date:	November 23, 2020
KY SoS Org. ID:	0561512

RE:	Letter of Good Standing Request - Approved				
SUMMARY	You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.				
OUR DETERMINATION	 We verified the following information. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place. This notice will remain current for 30 days from the notice date above. 				
WHAT YOU NEED TO DO	 If you are attempting to reinstate your entity, please provide a copy of this letter to the Kentucky Secretary of State within 30 days of the notice date above. If you are a for-profit corporation, you will also need to provide the Secretary of State a letter of good standing from the Division of Unemployment Insurance. Their telephone number is 502-564-6835. If you are a non-profit entity, please remember to file a copy of your tax returns with the Kentucky Attorney General. The charity filing requirements website is: http://ag.ky.gov/family/consumerprotection/ charity/Pages/registration.aspx. 				
CONTACT INFORMATION	If you have any questions regarding this notice, please contact me. Thank you. Agent: Bruce REV3968, Taxpayer Services Specialist II Direct: 502-564-2038				