

Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Reinstatement Annual Report
For the years 2014 through 2015

0450915.09

dcomish
PRPF

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
10/7/2015 12:56 PM
Fee Receipt: \$130.00

Exact organization name and principal office address

DEWAYNE SQUIRES LIMITED
1310 EAST BROADWAY
CAMPBELLSVILLE KY 42718

The principal office address and registered name/office address cannot be changed on this form. When reapplying, 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/search or can be downloaded from our website.

Registered Agent and Registered Office Address

DEWAYNE SQUIRES
1310 EAST BROADWAY
CAMPBELLSVILLE, KY 42718

FEIN (Optional)

61-1319306

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.

Sole Officer DEWAYNE SQUIRES

Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporate director addresses default to the principal office address.

The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. 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 271B.14-210. 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 DEWAYNE SQUIRES LIMITED 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.

Alison Lundergan Grimes
Signature of officer or chairman of the board (Required)

PRESIDENT
Title (Required)

10.05.15
Date (Required)



THOMAS B. MILLER
Commissioner

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

ELYSE WEIGEL
Deputy Commissioner

BOB BROOKS
Executive Director

October 7, 2015

**DEWAYNE SQUIRES LIMITED
1310 EAST BROADWAY
CAMPBELLSVILLE KY 42718**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **DEWAYNE SQUIRES LIMITED** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, and has paid the taxes shown to be due or assessed as of the date of this letter. 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.

Sincerely,

Stephanie REVX219, Taxpayer Services Specialist I
Division of Corporation Tax
501 High Street, Mail Sta. 69
Frankfort, KY 40601
502-564-2028
FAX# 502-564-3392

Kentucky Secretary of State organization number 0450915



**COMMONWEALTH OF KENTUCKY
DIVISION OF UNEMPLOYMENT INSURANCE**

TAX ENFORCEMENT BRANCH
EMPLOYER STATUS SECTION
275 E MAIN ST, 2-EH
FRANKFORT, KY 40621-0001
(502) 564-2272
<https://kewes.ky.gov>
DES.UIT@KY.GOV

Date: 10/07/2015

DEWAYNE SQUIRES LIMITED

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Richard Lemay
Division of Unemployment Insurance
275 East Main Street, 2-EH
Frankfort, Kentucky 40621
Phone: (502) 564-2272

Kentucky Secretary of State organization number 0450915