President BOI Secretary CH/ Vice President CAI Directors - Non-profit corporations r office address. DOUGLAS EVERLY CALLIE CRABTREE NANCY JOHNSON TIM SHEPARD The undersigned states that the requirements of KRS 273.3184 Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p	A principal office a Y DEVELOPMENT EE tered Office Address in a parent company's mail: me, address and title of a principal office address of NCY JOHNSON BBY JOHNSON AD RAFFERTY LUE CRABTREE	nstateme instatem For the yea address ASSOCIATION SS s Kentucky tax re all current officers. All Corporations are requ	ent A nent A nrs 2021 N, INC. A UT as a d I organization <u>uired to list a</u> $T_{T}$ VIC. tors of the nor a S C	pplica Annua 1 throug lisregarded as must list at Secretary or COSI COSI COSI COSI COSI COSI COSI COSI	ation a li Repo gh 2022 The priname(c form, V address reinstat filed on be dow FEIN entity or a s least one (1) o other officer se	incipal office ort	eceived ar 1/16/2022 ee Receipt address and s cannot be of ing, you cannot einstatement web.sos.ky.g our website.	8:10 AM t: \$130.00 <b>RST</b> d registered agen changed on this of modify the is filed. Once the nt of change can b nov\ftsearch or can hav\ftsearch or can bay\ftsearch or can hav ftsearch or can bay ftsearch or can hav ftsearch or	
Frankfort, KY 40602-071 (502) 564-3490 http://www.sos.ky.gov Exact organization name and ISLAND COMMUNIT % CALLIE CRABTRE BOX 62 ISLAND KY 42350 Registered Agent and Regist BOBBY JOHNSON CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 f the above company is included i company's information here (optio FEIN:	A principal office a Y DEVELOPMENT EE tered Office Address in a parent company's mail: me, address and title of a principal office address of NCY JOHNSON BBY JOHNSON AD RAFFERTY LUE CRABTREE	instatem For the yea Address ASSOCIATION s s Kentucky tax re all current officers. All Corporations are requ 3) directors. All direct	eturn as a d lorganization uired to list a V/C tors of the nor $A \leq C$	Annua 1 through lisregarded as must list at Secretary or C = C = C r = C	I Repo gh 2022 The prinamedo form, V address reinstat filed on be dow FEIN entity or a s least one (1) o other officer se <i>L</i> <u>C</u> <u>C</u> <u>C</u> <i>L</i> <u>C</u> <u>C</u> <u>C</u> <i>L</i> <u>C</u> <u>C</u> <u>C</u> <i>L</i> <u>C</u>	Drt incipal office office address Vhen reinstati uses until the re- ement is filed line at <u>https://</u> nloaded from UDSIdiary, p	s cannot be of ing, you cannot einstatement in the statemer web.sos.ky.g our website.	The parent is sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer. If not sole officer is not sole officer is not sole officer is not sole officer is not sole officer. If not sole officer is not sole offi	
(502) 564-3490 http://www.sos.ky.gov Exact organization name and ISLAND COMMUNIT % CALLIE CRABTRE BOX 62 ISLAND KY 42350 Registered Agent and Regist BOBBY JOHNSON CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 f the above company is included i company's information here (optio FEIN:	d principal office a Y DEVELOPMENT EE tered Office Address in a parent company's onal): me, address and title of a principal office address (C NCY JOHNSON BBY JOHNSON AD RAFFERTY LUIE CRABTREE	For the yea	eturn as a d lorganization utred to list a $\frac{7}{\sqrt{2}}$ tors of the nor a $\leq$	1 throug lisregarded as must list at <u>Secretary or c</u> <u>Poet</u> <u>a</u> <u>profit must 1 <u>perfit must 1</u></u>	gh 2022	incipal office office address When reinstati ses until the re- ement is filed line at <u>https://</u> nloaded from UDSIdiary, p UDSIdiary, p UDSIdiary, p UDSIdiary, p	s cannot be of ing, you cannot einstatement in the statemer web.sos.ky.g our website.	changed on this of modify the is filed. Once the nt of change can b nov\ftsearch or can nov\ftsearch or can node the parent sole officer. If not $To h n \leq r$ R c f f c r	
http://www.sos.ky.gov Exact organization name and ISLAND COMMUNIT % CALLIE CRABTRE BOX 62 ISLAND KY 42350 Registered Agent and Regist BOBBY JOHNSON CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 If the above company is included i company's information here (optio FEIN:	d principal office a Y DEVELOPMENT EE tered Office Address in a parent company's onal): me, address and title of a principal office address of NCY JOHNSON BBY JOHNSON AD RAFFERTY LUE CRABTREE	address ASSOCIATION SS s Kentucky tax re all current officers. All Corporations are requ 3) directors. All direct	A, INC. eturn as a d lorganization uired to list a $\frac{7}{10}$ $\frac{9}{10}$ tors of the nor $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac$	lisregarded as must list at <u>Secretary or c</u> P = A = A r = P = A r = P = A r = A = A r = A	The print name/c form, v address reinstat filed on be dow.	Affice address Vhen reinstati ses until the re- ement is filed line at <u>https://</u> nloaded from UDSIdiary, p UDSIdiary, p Continues Continues UDSIdiary, p Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues	s cannot be of ing, you cannot einstatement in the statemer web.sos.ky.g our website.	changed on this of modify the is filed. Once the nt of change can b nov\ftsearch or can nov\ftsearch or can node the parent sole officer. If not $To h n \leq r$ R c f f c r	
ISLAND COMMUNIT % CALLIE CRABTRE BOX 62 ISLAND KY 42350 Registered Agent and Regist BOBBY JOHNSON CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 If the above company is included in company's information here (option FEIN:	Y DEVELOPMENT EE tered Office Addres in a parent company's onal): me, address and title of a principal office address ( NCY JOHNSON BBY JOHNSON AD RAFFERTY LUE CRABTREE	ASSOCIATION SS S Kentucky tax re all current officers. All Corporations are requ 3) directors. All direct Called Called Called Called Called	eturn as a d Il organization <u>uired to list a</u> $\overline{Tr}$ $\underline{Sec}$ tors of the nor $\underline{a} \leq \underline{C}$	is must list at Secretary or $C$ C = C = C = C C = C = C = C n-profit must $1C = C = CC = C = CC = C = C$	name/c form, V address reinstat filed on be dow FFIN entity or a. s least one (1) o other officer se CA	Affice address Vhen reinstati ses until the re- ement is filed line at <u>https://</u> nloaded from UDSIdiary, p UDSIdiary, p Continues Continues UDSIdiary, p Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues Continues	s cannot be of ing, you cannot einstatement in the statemer web.sos.ky.g our website.	changed on this of modify the is filed. Once the nt of change can b nov\ftsearch or can nov\ftsearch or can node the parent sole officer. If not $To h n \leq r$ R c f f c r	
% CALLIE CRABTRE         BOX 62         ISLAND KY 42350         Registered Agent and Regist         BOBBY JOHNSON         CITY OF ISLAND         280 ADAMS AVENUE         P.O. BOX 33         ISLAND, KY 42350         f the above company is included is         company's information here (option officers - List the narrescription officer addresses default to the the there office addresses default to the there office addresses default to the there office address.         President       BOI         Secretary       CHI         Vice President       CAI         Directors - Non-profit corporations refifice address.       DOUGLAS EVERLY         DOUGLAS EVERLY       CALLIE CRABTREE         NANCY JOHNSON       Film SHEPARD         The above entity was administree of KRS 273.3184         Under penalty of perjury, the bein formation pertaining to ISLAN         einstatement pursuant to KRS         f not an officer of said entity, presenter of said	EE tered Office Addres in a parent company's onal): me, address and title of a principal office address. O NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	s Kentucky tax re all current officers. All <u>Corporations are requ</u> 3) directors. All direct	eturn as a d Il organization <u>uired to list a</u> $\overline{Tr}$ $\underline{Sec}$ tors of the nor $\underline{a} \leq \underline{C}$	is must list at Secretary or $C$ C = C = C = C C = C = C = C n-profit must $1C = C = CC = C = CC = C = C$	address reinstat filed on be dow FFIN entity or a s least one (1) o other officer se <u>AFEF</u> SIGEY be listed. If Not	ses until the re ement is filed line at <u>https://</u> nloaded from ubsidiary, p subsidiary, p filcer; even in <u>wing as reco</u> <u>Bool</u>	einstatement i , the statemer web.sos.ky.g our website.	is filed. Once the n of change can b <u>nov\ftsearch</u> or can not the parent n sole officer. If not To h n sole Roffer	
ISLAND KY 42350 Registered Agent and Regist BOBBY JOHNSON CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 If the above company is included i company's information here (optio FEIN:	in a parent company's onal): me, address and title of a principal office address. O NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	s Kentucky tax re all current officers. All <u>Corporations are requ</u> 3) directors. All direct	I organization uired to list a $P_{1}$ $S_{C}$ $V_{C}$ tors of the nor $a \leq C$	is must list at Secretary or $C$ C = C = C = C C = C = C = C n-profit must $1C = C = CC = C = CC = C = C$	reinstat filed on be dow FFIN entity or a s least one (1) o other officer se MFEF MEF be listed. If Not	ement is filed line at <u>https:/</u> nloaded from ubsidiary, p iubsidiary, p ifficer, even lin wing as recor <u>Rock</u>	, the statemer web.sos.ky.g our website.	Int of change can be considered with the parent of change of the parent	
BOBBY JOHNSON CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 If the above company is included in company's information here (option FEIN:	in a parent company's onal): me, address and title of a principal office address. O NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	s Kentucky tax re all current officers. All <u>Corporations are requ</u> 3) directors. All direct	I organization uired to list a $P_{1}$ $S_{C}$ $V_{C}$ tors of the nor $a \leq C$	is must list at Secretary or $C$ $P \cap S$ $P \cap F$ $P \cap C$ $P \cap C$	entity of a s least one (1) o other officer se $\Delta \int C \int C$ $\Delta = 1$ be listed. If Not	ubsidiary, p ffcer, even in <u>ving as reco</u> <u>Bo (</u> <u>C</u> <del>C</del>	the case of a ds custodian	Jolans Jolans Johns Raffer	son pin ty
CITY OF ISLAND 280 ADAMS AVENUE P.O. BOX 33 ISLAND, KY 42350 If the above company is included is company's information here (option FEIN:	in a parent company's onal): me, address and title of a principal office address. O NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	all current officers. All <u>Corporations are requ</u> 3) directors. All direct	I organization uired to list a $P_{1}$ $S_{C}$ $V_{C}$ tors of the nor $a \leq C$	is must list at Secretary or $C$ $P \cap S$ $P \cap F$ $P \cap C$ $P \cap C$	least one (1) o other officer se LFEF AF Sider be listed. If Not	fficer; even in rving as recor Bol Cr	the case of a ds custodian	Jolans Jolans Johns Raffer	son pin ty
ISLAND, KY 42350 if the above company is included in company's information here (option FEIN:	me, address and title of a principal office address. C NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	all current officers. All <u>Corporations are requ</u> 3) directors. All direct	I organization uired to list a $P_{1}$ $S_{C}$ $V_{C}$ tors of the nor $a \leq C$	is must list at Secretary or $C$ $P \cap S$ $P \cap F$ $P \cap C$ $P \cap C$	least one (1) o other officer se LFEF AF Sider be listed. If Not	fficer; even in rving as recor Bol Cr	the case of a ds custodian	Jolans Jolans Johns Raffer	son pin ty
Company's information here (option FEIN:	me, address and title of a principal office address. C NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	all current officers. All <u>Corporations are requ</u> 3) directors. All direct	I organization uired to list a $P_{1}$ $S_{C}$ $V_{C}$ tors of the nor $a \leq C$	is must list at Secretary or $C$ $P \cap S$ $P \cap F$ $P \cap C$ $P \cap C$	least one (1) o other officer se LFEF AF Sider be listed. If Not	fficer; even in rving as recor Bol Cr	the case of a ds custodian	Jolans Jolans Johns Raffer	son pin ty
specified, officer addresses default to the         Treasurer       NAI         President       BOI         Secretary       CH/         Vice President       CAI         Directors - Non-profit corporations r       OI         DOUGLAS       EVERLY         CALLIE CRABTREE       NANCY JOHNSON         TIM SHEPARD       States that the requirements of KRS 273.3184         Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS         f not an officer of said entity, proventions	Principal office address. C NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	3) directors All direct	uired to list a 7r 9rc 5ec 1/2C tors of the nor $a \leq 2$	Secretary or $C$ $C \cap C$ $C \cap C$ C		Ming as record A Bol CY	ds custodian NCY oby	Johns Johns Raffer	son pin ty
Treasurer       NAI         President       BOI         Secretary       CHI         Vice President       CAI         Directors - Non-profit corporations r       Contractors r         DOUGLAS       EVERLY         CALLIE CRABTREE       NANCY JOHNSON         TIM       SHEPARD         Che above entity was administr         The undersigned states that the equirements of KRS 273.3184         Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS         f not an officer of said entity, provide the entity of the states of the entity of the en	NCY JOHNSON BBY JOHNSON AD RAFFERTY LLIE CRABTREE	3) directors. All direct Dougle Callie Nanci	$\frac{7}{10}$	egside reta e Pre n-profil must I wer abts	NT NT Sidey be listed. If Not	- Na Bol CY A	ncy by rad	Johns Raffer	212 14
President BOI Secretary CH/ Vice President CAI Directors - Non-profit corporations r office address. DOUGLAS EVERLY CALLIE CRABTREE NANCY JOHNSON TIM SHEPARD The undersigned states that the equirements of KRS 273.3184 Under penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p	BBY JOHNSON AD RAFFERTY LLIE CRABTREE	Dougle Callie Nanci	tors of the nor $a \leq b$	eside refa e Pre n-profit must l ver abts	AT <u>FY</u> 2<12 be listed. If Not	Bol CY t		Johns Raffer	212 14
Vice President CAI Directors - Non-profit corporations r Unifice address. DOUGLAS EVERLY CALLIE CRABTREE NANCY JOHNSON TIM SHEPARD The above entity was administr The undersigned states that the equirements of KRS 273.3184 Under penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, pin X	LLIE CRABTREE	Dougle Callie Nanci	tors of the nor $a \leq b$	n-profit must UCI abtr		d	<u>\</u> ad	Raffer	14
Directors - Non-profit corporations r office address. DOUGLAS EVERLY CALLIE CRABTREE NANCY JOHNSON TIM SHEPARD The above entity was administr The undersigned states that the requirements of KRS 273.3184 Under penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, pursuant X		Dougle Callie Nanci	$\sqrt{2}$	<u>e Pre</u> n-profit must l <u>Wer</u> l abtr	be listed. If Not	<u>d</u>		ses default to the p	principal
Iffice address. DOUGLAS EVERLY CALLIE CRABTREE NANCY JOHNSON TIM SHEPARD The above entity was administr The undersigned states that the requirements of KRS 273.3181 Under penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, pursuant Market Advance	mușt have át least three (3	Dougle Callie Nanci	as E Cr 1 J	abte		specified, dir	ector address	ses default to the p	principal
office address. DOUGLAS EVERLY CALLIE CRABTREE VANCY JOHNSON TIM SHEPARD The above entity was administr The undersigned states that the requirements of KRS 273.3181 Under penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, pursuant Manual Advances	must nave at least inree (3	Dougle Callie Nanci	as E Cr 1 J	abte		specified, dir		ses default to the p	principal
CALLIE CRABTREE NANCY JOHNSON TIM SHEPARD The above entity was administr The undersigned states that the equirements of KRS 273.3184 Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, ping X AMALY ARM		<u>Callie</u> <u>Nanci</u>			y ee				
ANCY JOHNSON TIM SHEPARD The above entity was administr The undersigned states that the equirements of KRS 273.3184 Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, pl XCOMENT ARE		<u>Callie</u> <u>Nanci</u>			ele				
TIM SHEPARD The above entity was administr The undersigned states that the equirements of KRS 273.3184 Under penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p									
The above entity was administr The undersigned states that the equirements of KRS 273.3184 Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p		- Bobby	<u> </u>	1 CLANN C	SON		111 AT		
The undersigned states that the equirements of KRS 273.3181 Juder penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p		Second Contraction of the second s		ohns	on	V subjects			
The undersigned states that the equirements of KRS 273.3181 Juder penalty of perjury, the be information pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p				a <u>an an</u> an	ر الحري معادية الحري			<u>-</u> _	
Under penalty of perjury, the be nformation pertaining to ISLAN einstatement pursuant to KRS f not an officer of said entity, p	e grounds for dissol	lution either did	not exist	or have be	een elimina	ted, and th	ne entity's	name satisfie	2021. s the
Xnamer John	elow signed hereby ND COMMUNITY DI	authorizes the	Kentucky	Departme	ent of Revei	nue to rele	ase any a	pplicable tax	2
Signature of officer of airman of	lease provide a Dec	1	Series and the series of the series of the	•	the Reinsta	tement Ap	plication.	· ·	۰ <sup>-</sup>
	f the board (Required)	<i>Ire</i>	<u>20.5 U</u>	CCA itle (Required	l)		·//-	Date (Required)	<u> </u>
	·							· ·	
	,							• - •	
	-								



ISLAND COMMUNI ASSOCIATION, INC PO BOX 292 ISLAND KY 42350	TY DEVELOPMENT	Notice Date: KY SoS Org. ID:	November 14, 2022 0025219					
RE:	Letter of Good Standing Request - Approved							
SUMMARY	You requested a letter of good standing, and your entity is in <b>good standing</b> with the Department of Revenue.							
OUR DETERMINATION	<ol> <li>We verified the following information.</li> <li>You are registered with the Department of Revenue.</li> <li>An authorized person requested this letter.</li> <li>You filed income and LLE tax returns as required, or you are exempt from filing.</li> <li>You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.</li> <li>This notice will remain current for 30 days from the notice date above.</li> </ol>							
WHAT YOU NEED TO DO	<ul> <li>of this letter to the Kentucky Secreta notice date above.</li> <li>2. If you are a for-profit corporation, Secretary of State a letter of good st Unemployment Insurance. Their tele</li> <li>3. If you are a non-profit entity, plea tax returns with the Kentucky Attorn</li> </ul>	<b>If you are a for-profit corporation</b> , 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. <b>If you are a non-profit entity</b> , 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/						
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							