

Organization ID # 0330023

State of origin KY

Filing fee \$115.00

# Commonwealth of Kentucky

Alison Lundergan Grimes, Secretary of State

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Alison Lundergan Grimes  
Kentucky Secretary of State

Received and Filed:

10/29/2013 2:31 PM

Fee Receipt: \$115.00

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 year 2013

RST

### Exact organization name and principal office address

TRI-STATE QUALITY HEALTH NETWORK, INC.

OUR LADY OF BELLEFONTE HOSPITAL

ST. CHRISTOPHER DR.

ASHLAND KY 41101

The principal office address and registered agent 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/rtsearch](http://app.sos.ky.gov/rtsearch) or can be downloaded from our website.

### Registered Agent and Registered Office Address

LISA ENGLISH HORD, ESQ.

163 W. SHORT ST., SUITE 300

LEXINGTON, KY 40507

**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

President

ANGLEA LEWIS

Secretary

KEVIN HALTER

Treasurer

JOE BUCHHEIT

**Directors** - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address.

JAMES LANIER

KEVIN HALTER

JOE BUCHHEIT

WILLIAM WILLAN

ANGELA LEWIS

The above entity was administratively dissolved on September 28, 2013 because the entity did not file its annual report for the year 2013. 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 \$115.00, 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 TRI-STATE QUALITY HEALTH NETWORK, 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

Signature of officer or chairman of the board (Required)

Chairman

Title (Required)

October 21, 2013

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 29, 2013

**TRI-STATE QUALITY HEALTH NETWORK, INC.  
OUR LADY OF BELLEFONTE HOSPITAL  
ST. CHRISTOPHER DR.  
ASHLAND KY 41101**

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **TRI-STATE QUALITY HEALTH NETWORK, 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,

James Sutherland, Revenue Program Officer  
Pass Through Entity Branch  
501 High Street, Mail Station 69  
Frankfort, KY 40601  
Phone: (502) 564-7359  
Fax: (502) 564-3392

Kentucky Secretary of State organization number 0330023