Organization ID # State of origin Filing fee

0168824 KY \$115.00

Commonwealth of Kentucky Trey Grayson, Secretary of State

0168824.09

cchanev **PRPF**

Trey Grayson, Secretary of State Received and Filed:

11/16/2010 8:56 AM Fee Receipt: \$115.00

RST

Trey Grayson 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 2010

Exact organization name and principal office address

DEAN'S PHARMACY, INC. PO BOX 6 109 LOCUST ST **BROOKSVILLE KY 41004**

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/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

STEPHEN DEAN

100 LOCUS	ST ST.			
BROOKSV	ILLE, KY 41004			
incipal Officers	- List the name, address and title of all current of	officers. All organizations	must list at least one (1) officer, even in the case of a	sole officer.
ce President	STEPHEN T DEAN	40 46		
cretary	LINDA BOSSE			
a a i al a usk	CTEDUENT DEAN	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

President STEPHEN T DEAN JACKIE H DEAN Treasurer Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. 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 \$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 DEAN'S PHARMACY, 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.



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

DON RICHARDSON Executive Director

November 15, 2010

DEAN'S PHARMACY, INC. PO BOX 6 109 LOCUST ST BROOKSVILLE KY 41004

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **DEAN'S PHARMACY, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Roger Sullivan, Revenue Program Officer Pass Through Entity Tax Branch 501 High Street, 6th Floor, Sta. 69 Frankfort, KY 40601 502-564-7370 FAX# 502-564-3392

Kentucky Secretary of State organization number 0168824





EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor

Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso
Executive Director

Date: 11/15/2010	
DEAN'S PHARMACY, INC.	
Dear Sir/Madam:	

KRS 271B.14-220(1)(e) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

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

Kentucky Secretary of State organization number 0168824

