Organization ID # 0828826 Commonwealth of Kentucky
State of origin KY
Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta

0828826.09

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Alison Lundergan Grimes Kentucky Secretary of State

Received and Filed: 3/16/2018 1:48 PM Fee Receipt: \$130.00

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 years 2017 through 2018

RST

Date (Required)

Exact organization name and principal office address

MADISONVILLE COMMUNITY GOLF COURSE CORPORATION
105 COUNTRY CLUB LN
MADISONVILLE KY 42431

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		
	TCHFIELD		
	NTRY CLUB LN		
MADISON If the above compan	NVILLE, KY 42431 ly is included in a parent company's Kentuck	ky tax return as a disregarded e	
company's information		ty tax rotalli do a dicrogardos s	
	Name:		
Principal Officer	rs - List the name, address and title of all current of	officers. All organizations must list at least one (1) o	officer, even in the case of a sole officer. If not
specified, officer address	ses default to the principal office address. Corporation	ns are required to list a Secretary or other officer se	erving as records custodian
President	DAVID LITCHFIELD	1141 S. Main St.	Madisonville ky 42431
Secretary	RON KAFER		
Directors list the	name and address of all directors (if applicable).No	listing of directors is varification that the corporation	on has dispensed with directors. If not specified
	If to the principal office address.	listing of directors is verification that the corporation	in has dispensed with directors. If not specified,
DAVID LITCHFIE	I D		
RON KAFER			
			
The above entity w	vas administratively dissolved on Octobe	er 9, 2017 hecause the entity did not t	file its annual report for the year 2017.
The undersigned s	states that the grounds for dissolution ei	ther did not exist or have been elimina	ated, and the entity's name satisfies the
requirements of KI	RS 271B.14-210. Enclosed is a check ir	n the amount of \$130.00, payable to K	entucky State Treasurer.
Under penalty of p	erjury, the below signed hereby authori:	zes the Kentucky Department of Reve	enue to release any applicable tax
information pertain	ning to MADISONVILLE COMMUNITY Grant to KRS 271B.14-220.	GOLF COURSE CORPORATION to th	e Secretary of State, as required for
If not an officer of	said entity, please provide a Declaration	n of Power of Attorney with the Reinst	atement Application.
v 4)		Dresident	2.14-18

Title (Required)



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: 03/16/2018

MADISONVILLE COMMUNITY GOLF COURSE CORPORATION

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,

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

Kentucky Secretary of State organization number 0828826



Website: www.revenue.kv.gov Phone: 502-564-8139

502-564-0058 Fax:

MADISONVILLE COMMUNITY GOLF COURSE CORPORATION **1141 S MAIN ST MADISONVILLE, KY. 42431**

Notice Date: March 16, 2018 KY SoS Org. ID: 0828826

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.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- 3. You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. 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 1. 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.
 - 2. **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.
 - 3. 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: Ramon REV4636, Taxpayer Services Specialist I

Email: Ramon.Juanso@ky.gov

Direct: 502-564-2169