Organization ID # 0995328

Commonwealth of Kentucky State of origin KY
Filing fee \$130.00 Alison Lundergan Grimes, Secretary of State vmiller

NPRF Alison Lundergan Grimes

Received and Filed: 5/3/2019 11:44 AM Fee Receipt: \$130.00

Kentucky Secretary of State

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 2018 through 2019

| Exact organization name and principal office address |
|--|
| THE REX CHAPMAN FOUNDATION INC. |
| 300 E MAIN ST STE 239 |
| LEXINGTON KY 40507 |

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 <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website. | |
|--|---|--|--|--|
| Registered Agent and Registered Office Address | | | FEIN (Optional) | |
| JESSICA A | | | | |
| 323 Bold Fo | orbes Dr | | 8 2 - 2 63 01 1 6 | |
| Richmond, | KY 40475 | | | |
| f the above company i | is included in a parent company's | Kentucky tax return as a disregarded e | entity | |
| company's information | | | | |
| FEIN: | _ Name: | ************************************** | | |
| Principal Officers | - List the name, address and title of | all current officers. All organizations must list at le | easto | |
| | | Corporations are required to list a Secretary or of | her comments and the comments are comments and the comments and the comments and the comments are comments and the comments and the comments and the comments are comments and the comments and the comments and the comments are comments and the comments and the comments are comments and the comments and the comments are comments are comments and the comments are comments and the comments are comments are comments and the comments are comments are com | |
| President | Bobby Stuzen | 2657 Cayn | 2657 Coymen Keisers Lexington, K40509 | |
| Vice-President | | | | |
| Secretary | Don't Helmer | 115 Desha | Rd. 6ximm, 15 40002 | |
| Treasurer | er Tyler Burke | | 1400) Forbes Circle Lavanille, 19 40245 | |
| | | | | |
| Directors - Non-profit office address. | t corporations must have at least three | directors. All directors of the non-profit must be | be listed. If not specified, director addresses default to the principal | |
| Bobby Swxx | | 2657 Caymon Keights Lornian, Ky 40009 | | |
| Tuler Burker | | 14707 Follow Circle Louisville, 15 40245 | | |
| Dave Hele | | 115 Desha Ra warryn | | |
| Jessica & Barke | | PO Box 1510 White Cit | | |
| 1/essiva 4 | PX | 10 04 13 10 CHING CITY | 73 | |
| | | | | |
| | | | 0040 | |
| The above entity w | as administratively dissolved | on October 16, 2018 because the en | atity did not file its annual report for the year 2018. | |
| The undersigned st | tates that the grounds for diss | eck in the amount of \$130.00, payal | een eliminated, and the entity's name satisfies the | |
| | | | | |
| Under penalty of pe | erjury, the below signed hereb | y authorizes the Kentucky Department | ent of Revenue to release any applicable tax | |
| information pertain | ing to The Rex Chapman Fou | ndation inc. to the Secretary of State | e, as required for reinstatement pursuant to KRS | |
| 271B/14-220. | | | | |
| If not an officer of | said entity, please provide a D | eclaration of Power of Attorney with | the Reinstatement Application. | |
| 16Wh(1 | $\langle A \rangle$ | President | 4-25-19 | |
| A WIL | NV | | Date (Required) | |
| C Signature of office | e or chairman of the board (Required) | Title (Require | Of Ball (Hodgings) | |
| | | | | |

Website: www.revenue.kv.gov

May 3, 2019

0995328

Phone: 502-564-8139 502-564-0058 Fax:

The Rex Chapman Foundation Inc. **300 E Main St Ste 239** Lexington KY 40507

KY SoS Org. ID:

Notice Date:

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: Bruce REV3968, Taxpayer Services Specialist II

Email: Bruce.Owens@ky.gov

Direct: 502-564-2038