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bschell **NPRF**

Alison Lundergan Grimes **Kentucky Secretary of State** 2/20/2013 10:36 AM

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 2012 through 2013

RST

Fee Receipt: \$130.00

Exact organization name and principal office address NATIONAL CAVES ASSOCIATION, INC. 1904 MAMMOTH CAVE PARKWAY P.O. BOX 280 PARK CITY KY 42160

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.govfftsearch</u> or can be downloaded from our website.

	ندر ور			
SUSAN BERD 1904 MAMMO PARK CITY, K	TH CAVE PARKWAY Y 42161			
Principal Officers - Lis specified, officer addresses defar	it the name, all dress and title of elective ult to the principal office address, doubling	nt ombers. All organizations must list dons are condired to list a Secreting	a organical serving as seco	n the case of a sole officer, if not inds custodian
President	ERIC/EVANS GREG BECKLER		70 10 10	3
	SUSAN BERDEAUX SUSAN BERDEAUX	A 1986		
Directors - Non-profit corporation address.	orations must have at least three (3) direct	lors. Alcoholi ters of the non-profit m	ust be listed. If not specified, di	rector addresses default to the principal
BOB HOLT				1 01 1 12 1 12 1 12
ROD GRAVES			/ Francis	11:10:10:10:10:10:10:10:10:10:10:10:10:1
CLAUDIA YUNDT				1137 1137
STEVE THOMPSON				
JOE KLIMEZAK				
2012. The undersigned :	ministratively dissolved on Sep states that the grounds for disso ts of KRS 273 3181-Englosed	slution either did not exist	or have been eliminated	i, and the entity's name
Under penalty of perjury information pertaining to KRS 271B.14-220.	, the below signed hereby author NATIONAL CAVES ASSOCIA	prizes the Kentucky Depar NON-INC to the Servete	tment of Revenue to rel N. of State, as required	ease any applicable tax for reinstatement pursuant to
If not an officer of said e	ntity, please provide a Declarat	on of Power of Attorney W	ith the Reinstatement A	pplication.
X Rus A		Secretary ITre	asurer	2-/5-/3 Date (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

February 20, 2013

NATIONAL CAVES ASSOCIATION, INC. 1904 MAMMOTH CAVE PARKWAY P.O. BOX 280 PARK CITY KY 42160

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **NATIONAL CAVES ASSOCIATION, 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,

Baba Ceesay, Revenue Auditor Pass Through Entity Tax Branch 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2039 FAX# 502-564-3392

Kentucky Secretary of State organization number 0721232

