#### Organization ID # 0475836 **Commonwealth of Kentucky** State of origin KY Filing fee \$160.00 Alison Lundergan Grimes, Secretary of St

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 2013 through 2016

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NPRF

**Alison Lundergan Grimes** Kentucky Secretary of State Received and Filed: 12/27/2016 3:29 PM Fee Receipt: \$160.00

Exact organization name and principal office address M.C.A.R.E.S., INC. P.O. BOX 1495 **LEXINGTON KY 40588** 

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

JOHN W. RHODES 2105 MONA COURT, APT. #B LEXINGTON, KY 40505

If the above company is included in a parent company's Kentucky tax return as a disregarded entry or a subsidiary, please provide the parent company's information here (optional): FEIN: Name:

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

Secretary	GLENDA RHODES		
President	JOHN W RHODES		
Treasurer	DENISE SPENCE	 	

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

GLENDA RHODES				
JOHN W RHODES		 	 and the	
DENISE SPENCE	17	 	 	 
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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 \$160.00, 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 M.C.A.R.E.S., 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.

Signature of officer or chairman of the board (Required)

Title (Required)



DANIEL P. BORK Commissioner

#### FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

December 27, 2016

## M.C.A.R.E.S., INC. 1657 LINDY LANE LEXINGTON, KY. 40505

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **M.C.A.R.E.S., 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,

John REV3858, Revenue Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2099 FAX# 502-564-3392

Kentucky Secretary of State organization number 0475836





DANIEL P. BORK Commissioner

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