Organization ID# 0179240 State of origin Filina fee

Commonwealth of Kentucky \$115.00 Elaine N. Walker, Secretary of State 0179240.09

mstratton **PRPF** 

Elaine N. Walker, Secretary of State

Received and Filed: 9/26/2011 2:05 PM Fee Receipt: \$115.00

Elaine N. Walker 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 2011

RST

Exact organization name and principal office address

JAMES M. TOWNSEND AND SONS, INC. RT. 2, HWY. 41A S. P. O. BOX 5 **DIXON KY 42409** 

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

JAMES M. TOWNSEND RT. 2, HWY. 41A S. P. O. BOX 5 **DIXON, KY 42409** 



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 1544 US HWY SCOTT A.TOWNSEND <u>Treasurer</u> 1514 SCOTT A.TOWNSEND Vice President US HWY 4HA 1514 SCOTT A TOWNSEND Secretary MACK A. US HWY 41-A 1.0. Bx5 TOWNSEND **President** Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address. The above entity was administratively dissolved on September 10, 2011 because the entity did not file its annual report for the year 2011. 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 JAMES M. TOWNSEND AND SONS, 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 WEIGEL**Deputy Commissioner

BOB BROOKS
Executive Director

September 23, 2011

JAMES M. TOWNSEND AND SONS, INC. RT. 2, HWY. 41A S. P. O. BOX 5 DIXON KY 42409

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **JAMES M. TOWNSEND AND SONS, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2010, 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,

James Sutherland, Revenue Program Officer Pass Through Entity Branch 501 High Street, Mail Station 69 Frankfort, KY 40601

Phone: (502) 564-7359 Fax: (502) 564-3392

Kentucky Secretary of State organization number 0179240





## **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: 09/23/2011

JAMES M. TOWNSEND AND SONS, INC.

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,

Tara Welch Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621

Phone: (502) 564-2272

Kentucky Secretary of State organization number 0179240

