Organization ID # 0971244 State of origin Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

0971244.09

Fee Receipt: \$130.00

NPRF

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 3/9/2020 4:34 PM

TOT

Michael G. Adams 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 2019 through 2020

Exact organization name and principal office address GLORY LAND COMMUNITY CHURCH, INC **45 LAUREL RIDGE CORBIN KY 40701**

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

			downloaded from our we	bsite.
Registered Agent and Registered Office Address			FEIN (Optional)	
LINDA GREGOR	Ÿ			
1605 S MAIN ST				
CORBIN, KY 407				
		entucky tax return as a disregard		ent
company's information here (optional): ne:			
TENVTVAIT	···			
Principal Officers - List to specified, officer addresses default	ne name, address and title of all cu to the principal office address. Corp	urrent officers. All organizations must list a porations are required to list a Secretary or	at least one (1) officer, even in the r other officer serving as records	e case of a sole officer. If not custodian
President	ROGER GREGORY			
Vice President	LONNIE SAWYERS			
Secretary	ANITA SAWYERS			
Treasurer	LINDA GREGORY			
office address.	tions must have at least three (3) di	rectors. All directors of the non-profit must	t be listed. If Not specified, direct	or addresses default to the principal
ROGER GREGORY				
LINDA GREGORY				
LONNIE SAWYERS				
ANITA SAWYERS				
The undersigned states that	at the grounds for dissolution	october 16, 2019 because the eleon either did not exist or have bein the amount of \$130.00, paya	peen eliminated, and the	entity's name satisfies the
		thorizes the Kentucky Departm Y CHURCH, INC to the Secreta		
If not an officer of said enti	ty, please provide a Declai	ration of Power of Attorney with	the Reinstatement Appl	ication.
X Signature of Officer Or chairr	nan of the/board (Required)	Treasurer Title (Require	ed)	3-5 - 2020 Date (Required)

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

March 9, 2020

0971244

502-564-0058 Fax:

Notice Date:

KY SoS Org. ID:

GLORY LAND COMMUNITY CHURCH, INC 45 LAUREL RIDGE **CORBIN KY 40701**

SUMMARY

RE:

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.

Letter of Good Standing Request - Approved

- 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: Dottye REV3769, Taxpayer Specialist I

Email: Dottye.Roberts@ky.gov

Direct: 502-564-0102