

Organization ID # 0564945
State of origin KY
Filing fee \$12.00

Commonwealth of Kentucky
Trey Grayson, Secretary of State

0564945.09

bschell
NPRF

Trey Grayson, Secretary of State
Received and Filed:
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Fee Receipt: \$12.00

Trey Grayson
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 2010

RST

Exact organization name and principal office address

MEADE FAMILY CEMETERY, INC.
719 SALISBURY BRANCH ROAD
DEMA KY 41859

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/ftssearch or can be downloaded from our website.

Registered Agent and Registered Office Address

SONJA HOLBROOK
719 SALISBURY BRANCH ROAD
DEMA, KY 41859

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.

President	SONJA HOLBROOK
Vice President	OGIE SLONE
Secretary	JANET MEADE
Treasurer	EUGENE MEADE

Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. Provide names and addresses below.

SONJA HOLBROOK	
OGIE SLONE	
JANET MEADE	

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. 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 \$12.00, 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 MEADE FAMILY CEMETERY, 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.

X Jonie Holbrook
Signature of officer or chairman of the board (Required)

President
Title (Required)

11-14-10
Date (Required)



THOMAS B. MILLER
Commissioner

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

ELYSE WEIGEL
Deputy Commissioner

DON RICHARDSON
Executive Director

November 22, 2010

**MEADE FAMILY CEMETERY, INC.
719 SALISBURY BRANCH ROAD
DEMA KY 41859**

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **MEADE FAMILY CEMETERY, 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,

Neelofar Moula, Revenue Auditor
Pass Through Entity Tax Branch
501 High Street, 6th Floor, Sta. 69
Frankfort, KY 40601
502-564-7335
FAX# 502-564-3392

Kentucky Secretary of State organization number 0564945