Organization ID # 0596051 State of origin Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

Commonwealth of Kentucky

0596051.09

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 12/9/2019 4:57 PM

Fee Receipt: \$115.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490

## Reinstatement Application and **Reinstatement Annual Report** For the year 2019

http://www.so	s.ky.gov			
	<del></del>	٠.	The principal office address and rename/office address cannot be cheform. When reinstating, you cannot addresses until the reinstatement is reinstatement is filed, the statement filed online at app.sos.ky.gov/ftseal downloaded from our website.	nanged on this modify the filed. Once the of change can be
W. RAY WIL	nd Registered Office Address -SON SATAL OSDIT I STREET #513 141749	ne	FEIN (Optional)	
	s included in a parent company's Kentu	cky tax return as a disregard	le	ent
	<ul> <li>List the name, address and title of all current default to the principal office address. Corporation</li> </ul>			sole officer. If not
President	WRAY WILSON resi	aned		
Treasurer	SARAH OSBORNE	J.O. (	50x 212, Huden 16	M 41749
Vice President	BRENDA BENTLEY			
office address.	corporations must have at least three (3) directo	rs. All directors of the non-profit m	ust be listed. If Not specified, director addresse	s default to the principal
BRENDA BENTLE	<u> </u>			
-W. RAY WILSON	resigned			
SARAH OSBORNE	<u> </u>	P.D. Box	UZ, Hyden KU	41749
merle Cai	adill	<u> </u>		
			<del></del>	
The above entity was	administratively dissolved on Octob	per 16, 2019 because the	entity did not file its annual report f	or the year 2019.

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 \$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 LESLIE COUNTY FOOD PANTRY, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

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

502-564-0058 Fax:

LESLIE COUNTY FOOD PANTRY, INC. P.O. BOX 212 **HYDEN KY 41749** 

Notice Date: KY SoS Org. ID:

December 9, 2019

0596051

RE: Letter of Good Standing Request - Approved

**SUMMARY** 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.

- 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