mstratton 0773753.09 NPRF Organization ID # 0773753 **Commonwealth of Kentucky Alison Lundergan Grimes** State of origin KY Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St Kentucky Secretary of State Received and Filed: 10/29/2014 10:33 AM Fee Receipt: \$115.00 Alison Lundergan Grimes **Reinstatement Application and** Secretary of State RST P. O. Box 718 **Reinstatement Annual Report** Frankfort, KY 40602-0718 For the year 2014 (502) 564-3490 http://www.sos.ky.gov The principal office address and registered agent

Exact organization name and principal office address HARNED UNITED METHODIST CHURCH, INC. 97 SOUTH HIGHWAY 259 HARDED KY 40144 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 <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website.

Registered Agent and Registered Office Address

REV. JANET L CARDEN 97 SOUTH HIGHWAY 259 HARDED, KY 40144

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

President	PAUL EDD BU	TLER				
Vice President	EDDIE DYER					
Secretary	JOANN BUTLE	R				
Treasurer	BRENT HOWE					
Directors - Non-profit co	porations must have at leas	st three (3) directors. Al	directors of the non-pro	fit must be listed. If not spec	cified, director addresse	es default to the princip
office address.	porations must have at leas	st three (3) directors. Al	l directors of the non-pro	it must be listed. If not spec	ified, director addresse	es default to the principa
office address. EARL WRIGHT	porations must have at leas	st three (3) directors. Al	I directors of the non-pro	it must be listed. If not spec	tified, director addresse	es default to the principa
	porations must have at leas	st three (3) directors. All	l directors of the non-pro	it must be listed. If not spec	ified, director addresse	es default to the principa

The above entity was administratively dissolved on September 30, 2014 because the entity did not file its annual report for the year 2014. 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 HARNED UNITED METHODIST CHURCH, 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.

isident of officer or chairman of the board (Required) Litle (Required

 $\frac{10-2)-2014}{\text{Date (Required)}}$



THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL **Deputy Commissioner**

BOB BROOKS Executive Director

October 29, 2014

HARNED UNITED METHODIST CHURCH, INC. 97 SOUTH HIGHWAY 259 **HARDED KY 40144**

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, HARNED UNITED **METHODIST CHURCH, 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,

Theresa REV0868, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7288 FAX# 502-564-0058

Kentucky Secretary of State organization number 0773753

