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mstratton **NPRF**

Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 5/21/2018 2:09 PM Fee Receipt: \$130.00

Organization ID# 0140958 Commonwealth of Kentucky State of origin KY Filing fee \$130.00 Alison Lundergan Grimes, Secretary of State 0140958

Alison Lundergan Grimes Secretary of State P. O. Box 718

Reinstatement Application and

RST

Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	For the years 2017 through 2018,	
Exact organization name and prin	cipal office address	
GREENVILLE PUBLIC HO 100 PRITCHETT DRIVE GREENVILLE KY 42345		
Registered Agent and Registered Office Address		FEIN (Optional)
BEN C. VANHOOSER 118 COURT STREET GREENVILLE, KY 42345 If the above company is included in a pacompany's information here (optional): FEIN:	rent company's Kentucky tax return as a disregarde	d entity or a subsidiary, please provide the parent
Principal Officers - List the name, add specified, officer addresses default to the principal	ress and title of all current officers. All organizations must list a al office address. Corporations are required to list a Secretary o	at least one (1) officer, even in the case of a sole officer. If not rether officer serving as records custodian
Secretary BEN C.	VANHOOSER	
Treasurer BEN C, \	/ANHOOSER	
President L. WAYN	IE CISNEY, JR.	
Vice President MARK C	URRY	
Directors - Non-profit corporations must ha office address.	ve at least three (3) directors. All directors of the non-profit mus	st be listed. If not specified, director addresses default to the principal
L. WAYNE CISNEY, JR.		
MARK CURRY		
BEN C. VANHOOSER		
TONY ROBINSON		
The undersigned states that the group requirements of KRS 273.3181. End	inds for dissolution either did not exist or have losed is a check in the amount of \$130.00, pay	
Under penalty of perjury, the below s information pertaining to GREENVIL pursuant to KRS 271B.14-220.	igned hereby authorizes the Kentucky Departn LE PUBLIC HOUSING CORPORATION to the	nent of Revenue to release any applicable tax Secretary of State, as required for reinstatement
If not an officer of said entity, please	provide a Declaration of Power of Attorney with	h the Reinstatement Application.
X Signature of officer of chairman of the Box	Secretary June Required)	Treasurer 5-18-18 Date (Required)
	U^{-1}	

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

502-564-0058 Fax:

GREENVILLE PUBLIC HOUSING CORPORATION 100 PRITCHETT DRIVE **GREENVILLE KY 42345**

Notice Date: May 21, 2018 KY SoS Org. ID: 0140958

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: Ramon REV4636, Taxpayer Services Specialist I

Email: Ramon.Juanso@ky.gov

Direct: 502-564-2169