Organization ID # State of origin Filing fee

0538059

Commonwealth of Kentucky \$115.00 Elaine N. Walker, Secretary of State

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 1/12/2012 8:10 AM Fee Receipt: \$115.00

Elaine N. Walker 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 2011

731

Exact organization name and principal office address GOOD NEW\$ HEALTHCARE MINISTRIES, INC PO BOX 1706 **BARBOURVILLE KY 40906**

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/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

CHARLES STARGEL 215 N. ALLISON AVENUE BARBOURVILLE, KY 40906



Principal Officers - List the name, address and tittle 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 harles STEPHEN K TOADVINE DAVID MORELAND Helton Secretary <u>Treasurer</u> DARREN K WEST Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address. Foster DERRICK FOSTER **RICK PARTIN** STEPHEN TOADVINE Churles DARREN K WEST The above entity was administratively dissolved on September 10, 2011 because the entity did not file its annual report for the year 2011. 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 GOOD NEWS HEALTHCARE MINISTRIES, 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.

Treasurer Title (Required)



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

January 12, 2012

GOOD NEWS HEALTHCARE MINISTRIES, INC PO BOX 1706 BARBOURVILLE KY 40906

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **GOOD NEWS HEALTHCARE MINISTRIES**, **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 Collins, Taxpayer 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 0538059

