amcray NPRF

**Alison Lundergan Grimes Kentucky Secretary of State** 

Received and Filed: 3/8/2012 2:47 PM

## Organization ID # 0513065 Commonwealth of Kentucky State of origin Filing fee \$265.00 Alison Lundergan Grimes, Secretary of State Fee Receipt: \$265.00

Alison Lundergan Grimes 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 years 2002 through 2012

**RST** 

Exact organization name and principal office address EASTPOINT CENTRE ASSOCIATION, INC. **5500 WEST HOWARD STREET** SKOKIE IL 60077

The principal office address and registered agent nne principal ordre sudpress 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.kv.gov/fisearch or can be downloaded from our website.

Registered Agent and Registered Off	ice Address
	1975

J. PAUL KEITH III 2500 BROWN & WILLIAMSON TOWER LOUISVILLE, KY 40202

Principal Officers - List the name, address and table of at 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 addresses (Corporations are required to fish a Secretarity or other, officer participal office custodian

President	Michael Richardso	n 5500 W.	Howard, Skokia IL 60	
Vice-President	Ronald V. Siegel	5500 W.	Howard, Skokie IL 60	077
Secretary	Wirt Rosene		Howard, Skokie, L 60	
Treasurer	for Resene		Howard, Skokie, LL 60	
office address.	I beares 1	ctors. Althoropis of the non-prof	it must be listed. If not specified, director addre	esses default to the principal
Michael Richards	idan 🤝 🚶 55	OU W. Howard; SE		
Ronald F. Siegel	<b>3 3 5 5 5</b>	00 W, Howard, SI	cokie, il 60077	
Kurt Rosene		00 W. Howard Si		
			2/ a. 3/4	
	X	동 전 구 . · (1)년	<i>&amp;/</i> ₹ ₹ 1 <i>y</i>	

The above entity was administratively dissolved or November 1, 2002 because the entity did not file its annual report for the year 2002. The undersigned states that the grounds for dissolution either did not existed have been eliminated, and the entity's name satisfies the requirements of KRS 273.3 81. Enclosed is a check in the amount of \$265.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed thereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to EASTPOINT CENTRE ASSOCIATION; 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 Fower of Attorney with the Reinstatement Application.					
x / ////	Vice-President	2/27/2012			
Signature of officer or chairman of the board (Required) Ronald F. Siegel	Title (Required)	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

March 8, 2012

EASTPOINT CENTRE ASSOCIATION, INC. 306 W. MAIN STREET FRANKFORT KY 40601

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **EASTPOINT CENTRE ASSOCIATION, 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,

Baba Ceesay, Revenue Auditor Pass Through Entity Tax Branch 501 High Street, Mail Sta. 69 Frankfort, KY 40601 502-564-2039 FAX# 502-564-3392

Kentucky Secretary of State organization number 0513065

