State of origin	n t	Commonweal undergan Grii		•	0465566.09 Alison Lundergan Gi Kentucky Secretary Received and Filed: 12/9/2019 8:05 AM	
P. O. Box 718 Frankfort, KY 40602-0718 Reinstaten			ent Application and nent Annual Report the year 2019		Fee Receipt: \$115.00	
Exact organization n TOWNE SQL % THOMAS 3006 SPROV LOUISVILLE	JARE VILLAGE OV D. SPARKS VL RD.	office address INERS ASSOCIATION, I	NC.	name/office addn form. When reinst addresses until the reinstatement is fil	ce address and registered ag ess cannot be changed on th lating, you cannot modify the e reinstatement is filed. Once th ed, the statement of change ca sos.ky.gov/fisearch or can be our website.	is ne an be
Registered Agent and THOMAS D. 3006 SPROV LOUISVILLE If the above company is company's information h FEIN:	SPARKS VL ROAD , KY 40299 included in a parent c ere (optional):	e Address company's Kentucky tax retu	ırn as a disregarded	-		
Principal Officers - specified, officer addresses do	List the name, address a stault to the principal office	nd title of all current officers. All o address. Corporations are requir	rganizations must list at least ed to list a Secretary or other	one (1) officer, ever officer serving as re	n in the case of a sole officer. If cords custodian	not
President	THOMAS D S	SPARKS				
Treasurer	CARL WEICT	<u>er</u>	Sarah	GOOD	1 _N	
Secretary	DAVID HOGI	埋	- Car	R Weige	٤	
Directors - Non-profit co office address.	prporations must have at k	ast three (3) directors. All director	rs of the non-profit must be lis	ited. If Not specified,	director addresses default to the	ne principal
JOHNE ROST		Wallr.	& Clark	- <u> </u>		
DAVID HOQUE		RAY F	Brown			
SADALL COODIN		lladth	HORLER			

The above entity was administratively dissolved on October 16, 2019 because the entity did not file its annual report for 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 TOWNE SQUARE VILLAGE OWNERS 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 Power of Attorney with the Reinstatement Application.

12-1-19 Date (Required) Presides nin Signature of officer Or chairman of the board (Required)



TOWNE SQUARE VILLAGE OWNERS ASSOCIATION, Notice Date: December 6, 2019INC.KY SoS Org. ID: 0465566% THOMAS D. SPARKS3006 SPROWL RD.LOUISVILLE KY 40299						
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. You are registered with the Department of Revenue. An authorized person requested this letter. You filed income and LLE tax returns as required, or you are exempt from filing. 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	 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. 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. 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: Megan REVY099, Taxpayer Services Specialist I Email: MeganD.Roberts@ky.gov Direct: 502-564-7310					