Organization ID # 0031771 State of origin KY Filing fee \$160.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

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Michael G. Adams Kentucky Secretary of State

Received and Filed: 10/26/2021 12:43 PM Fee Receipt: \$160.00

RST

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

C/O CHARLES J. LISLE

Reinstatement Application and Reinstatement Annual Report For the years 2018 through 2021

LEXINGTON KY 40503

Exact organization name and principal office address

2121 NICHOLASVILLE RD, SUITE 101

LEXINGTON SKI AND SPORTS CLUB, INC.

Registered Agent and Registered Office Address
CHARLES J. LISLE
2121 NICHOLASVILLE RD, SUITE 101
LEXINGTON, KY 40503

If the above company is included in a parent company's Kentucky tax return as a disregarded entity or a subsidiary, please provide the parent company's information here (optional):

FEIN:

Name:

Define in a Define and a subsidiary, please provide the parent company's information here (optional):

| President | DAN GEIGER | | | | | | |
|---|--|----------------------|-----------------|---------------------|---------------------------|-------------------|---------------|
| Treasurer | CHARLES J LISLE | | | | | | |
| Vice President | HOWARD E GLAUERT | | | | | | |
| | | | · | | <u> </u> | | |
| Discontant . | | | | | | | |
| | corporations must have at least three (3) of | lirectors. All direc | tors of the nor | n-profit must be li | sted. If Not specified, o | lirector addresse | s default to |
| the principal office address. | | lirectors. All direc | tors of the nor | n-profit must be li | sted. If Not specified, o | lirector addresse | s default to |
| the principal office address. JANET G JONES | | lirectors. All direc | tors of the nor | n-profit must be li | sted. If Not specified, o | lirector addresse | s default to |
| TERRY L CARRICO | DN | lirectors. All direc | tors of the nor | i-profit must be li | sted. If Not specified, o | lirector addresse | s default to |
| the principal office address. JANET G JONES JERRY J ANDERSO | DN | lirectors. All direc | tors of the nor | -profit must be li | sted. If Not specified, c | lirector addresse | es default to |

The above entity was administratively dissolved on October 16, 2018 because the entity did not file its annual report for the year 2018. 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 \$160.00, 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 LEXINGTON SKI AND SPORTS CLUB, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

| i not an officer of said entity, please provide a Decia | ration of Power of Attorney with the Reinstatement Ap | plication. | |
|--|---|---------------|-----|
| X Charles 3 hole | Treadule | 10/21/ | 21 |
| Signature of officer Or chairman of the board (Required) | Title (Required) | Date (Require | ed) |

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

Fax: 502-564-0058

CHARLES J LISLE PSC **PO BOX 2184 LEXINGTON KY 40588**

Notice Date:

October 26, 2021

KY SoS Org. ID: 0031771

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: Tonja REV3883, Taxpayer Services Specialist II

Email: Tonja.Lilly@ky.gov Direct: 502-564-7289