

Organization ID # 0618874

State of origin KY

Filing fee \$15.00

# Commonwealth of Kentucky

Alison Lundergan Grimes, Secretary of State

0618874.09

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PRPF

Alison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
10/26/2017 2:02 PM  
Fee Receipt: \$115.00

Alison Lundergan Grimes  
Secretary of State  
P. O. Box 1150  
Frankfort, KY 40602-1150  
(502) 564-3490  
<http://www.sos.ky.gov>

## 60 Day Notice Annual Report August 7, 2017 Must be received by October 6, 2017

### Exact organization name and principal office address

ELECTRIC DEPOT, INC.  
2506 MARGARET ANN DRIVE  
MT. STERLING KY 40353

The principal office address and registered agent name/office address cannot be changed on this form. You can file online at [app.sos.ky.gov/ftsearch](http://app.sos.ky.gov/ftsearch) or forms can be downloaded from our website.

### Registered Agent and Registered Office Address

STANLEY SPENCE  
915 CAMARGO ROAD  
MT. STERLING, KY 40353

**Principal Officers** - List the name, address and title of all current officers. All organizations must list at specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or

President STANLEY R. SPENCE

**Directors** - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address.

Please indicate the county in which your business operates:

County: Montgomery

To complete the following, please shade the box completely.

Please indicate the size of your business:

- ☒ Small (Fewer than 50 employees)  
☐ Large (50 or more employees)

Please indicate whether any of the following make up more than fifty percent (50%) of your business ownership:

- ☐ Women-Owned ☐ Veteran-Owned ☐ Minority-Owned

Please indicate which of the following best describes your business:

- |                                                |                                                                                           |                                        |                                                          |
|------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Agriculture           | <input type="checkbox"/> Mining                                                           | <input type="checkbox"/> Services      | <input type="checkbox"/> Construction                    |
| <input type="checkbox"/> Wholesale Trade       | <input checked="" type="checkbox"/> Retail Trade                                          | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, Real Estate |
| <input type="checkbox"/> Public Administration | <input type="checkbox"/> Transportation, Communications, Electric, Gas, Sanitary Services |                                        |                                                          |
| <input type="checkbox"/> Other                 |                                                                                           |                                        |                                                          |

X Stanley R. Spence  
Signature of officer or chairman of the board (Required)

President  
Title (Required)

10-24-17  
Date (Required)

**FINAL REMINDER:** Failure to file your annual report by October 6, 2017 by 4:30pm (EST) will result in administrative dissolution.

**TO AVOID A PENALTY FEE OF \$100, SAVE TIME, FILE ONLINE:** <http://app.sos.ky.gov/arp/0618874> OR

sign and return to the Office with the required \$15.00 filing fee no later than October 6, 2017

To file via mail:

- Confirm the information is correct.
- Make changes by writing on this annual report, or by submitting an attachment with the signed report.
- The signed annual report, any attachments and filing fee (payable to the Kentucky State Treasurer) **must be received in the Office by October 6, 2017**
- If filing online, do not return this annual report or submit payment.



**COMMONWEALTH OF KENTUCKY  
DIVISION OF UNEMPLOYMENT INSURANCE**

TAX ENFORCEMENT BRANCH  
EMPLOYER STATUS SECTION  
275 E MAIN ST, 2-EH  
FRANKFORT, KY 40621-0001  
(502) 564-2272  
<https://kewes.ky.gov>  
DES.UIT@KY.GOV

Date: 10/26/2017

ELECTRIC DEPOT, INC.

Dear Sir/Madam:

**KRS 14A.7-030(1)(f) CERTIFICATE**

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Richard Lemay  
Division of Unemployment Insurance  
275 East Main Street, 2-EH  
Frankfort, Kentucky 40621  
Phone: (502) 564-2272

Kentucky Secretary of State organization number 0618874



**DANIEL P. BORK**  
Commissioner

**FINANCE AND ADMINISTRATION CABINET  
DEPARTMENT OF REVENUE  
OFFICE OF INCOME TAXATION**

October 26, 2017

**ELECTRIC DEPOT, INC.  
2506 MARGARET ANN DRIVE  
MT. STERLING KY 40353**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **ELECTRIC DEPOT, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2016, and has paid the taxes shown to be due or assessed as of the date of this letter. 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.

Sincerely,

Ramon REV4636, Taxpayer Services Specialist I  
Pass Through Entity Branch  
501 High Street, Mail Station 52  
Frankfort, KY 40601  
Phone# (502) 564-2169  
Fax# (502) 564-0058

Kentucky Secretary of State organization number 0618874