Organization ID # State of origin	KY	Commonwealth of Ke Trey Grayson, Secretar	Noneao Ny	0088182 Trev Gravson	.09 dcornish PRPF , Secretary of State
Filing fee\$115.00Trey Grayson Secretary of State P. O. Box 718Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov				Received and Filed: 12/3/2010 9:46 AM Fee Receipt: \$115.00	
		Reinstatement Application and Reinstatement Annual Report For the year 2010			RST
Exact organization name and principal office address HOMETOWN TELEVISION, INC. 2212 SAMANTHA CIRCLE PAINTSVILLE KY 41240			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 <u>aposos kv.aov/fisearch</u> or can be downloaded from our website.		
J. C. BLEV 2212 SAM	· · -				
Principal Officers Sole Officer	List the name, a	idress and title of all current officers. All organizations	must ist at least one (1) ontoor, even m	1110 0200 01 8 3018	oncer.
Directors - List the na	me and address o	f all directors (if applicable). No listing of directors is ver	fication that the corporation has dispen	sed with directors.	
JAMES C BLEVINS	<u>}</u>		****		
			· · · · · · · · · · · · · · · · · · ·		

The above entity was administratively dissolved on November 2, 2010 because the entity did not file its annual report for the year 2010. 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 271B.14-210. 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 HOMETOWN TELEVISION, 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.

Trisident 11/8/2010 itle (Required) e board (Requi



## EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 <u>www.oet.ky.gov</u> Joseph U. Meyer Secretary

William Monterosso Executive Director

Date: 12/03/2010

HOMETOWN TELEVISION, INC.

Dear Sir/Madam:

## KRS 271B.14-220(1)(e) CERTIFICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

Sincerely,

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

Kentucky Secretary of State organization number 0088182





THOMAS B. MILLER Commissioner

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

ELYSE WEIGEL Deputy Commissioner

DON RICHARDSON Executive Director

December 2, 2010

## HOMETOWN TELEVISION, INC. 2212 Samantha Circle PAINTSVILLE KY 41240

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **HOMETOWN TELEVISION, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, 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,

Marcia Oakman, Revenue Auditor Division of Corporation Tax 501 High Street, 7th Floor, Sta. 52 Frankfort, KY 40601 502-564-7315 FAX# 502-564-0058

Kentucky Secretary of State organization number 0088182

