Organization ID # 0765085 **Commonwealth of Kentucky** State of origin Filing fee \$145.00 Alison Lundergan Grimes, Secretary of Sta

0765085.09

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Alison Lundergan Grimes **Kentucky Secretary of State**

Received and Filed: 3/19/2013 12:45 PM Fee Receipt: \$145.00

RST

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 2011 through 2013

Exact organization name and principal office address

THE BILL MCMILLAN-BLUEGRASS CHAPTER OF THE ASSOCIATION OF THE UNITED STATES ARMY, INC.

3177 HEMINGWAY LANE **LEXINGTON KY 40513**

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 app.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

WILLIAM LLOYD MCMILLAN 3177 HEMINGWAY LANE LEXINGTON, KY 40513



| Principal Officers - L. specified, officer addresses def | ist the name, address and title of all cu ault to the principal office address. Corpo | ment officers. All organizations must list at least one or arations are required to list a Secretary or other office | 1) officer, even in the case of a sole officer. If not a serving as records custodian |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| President | William Word M | | |
| Vice-President | N/A | | |
| Secretary | | | |
| Treasurer | Christopher Do | It 444 East Main St | Surte III Lexington Ky 40507 |
| Directors - Non-profit con office address. | porations must have at least three (3) dir | ectors. All directors of the non-profit must be listed. t | not specified, director addresses default to the principal |
| Jimmy Na | sh | | |
| Steve Colli | ns | | |
| Jason cum | mins | | |
| | | | |
| | | The second secon | |
| 2011. The undersigned | states that the grounds for dis | eptember 10, 2011 because the entity of solution either did not exist or have bea d is a check in the amount of \$145.00, | en eliminated, and the entity's name |
| information pertaining t | O THE BILL MCMILLAN-BLUE | thorizes the Kentucky Department of Ro GRASS CHAPTER OF THE ASSOCIA ement pursuant to KRS 271B.14-220. | evenue to release any applicable tax TION OF THE UNITED STATES ARMY, |
| If not anyofficer of said | entity, please provide a Declar | ation of Power of Attorney with the Rei | nstatement Application. |
| | Llyd Mimble | President | 3/18/13 |
| Signature of officer or c | nairman of the board (Required) | Title (Required) | Date (Required) |



THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKSExecutive Director

March 19, 2013

THE BILL MCMILLAN-BLUEGRASS CHAPTER OF THE ASSOCIATION OF THE UNITED STATES ARMY, INC.
3177 HEMINGWAY LANE
LEXINGTON KY 40513

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **THE BILL MCMILLAN-BLUEGRASS CHAPTER OF THE ASSOCIATION OF THE UNITED STATES ARMY, 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,

Ellina Alford, Revenue Program Officer Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2112 FAX# 502-564-0058

Kentucky Secretary of State organization number 0765085

