Organization ID # 0054688 State of origin Filing fee

KY

**Commonwealth of Kentucky** \$145.00 Elaine N. Walker, Secretary of State 0054688.09

dcornish **NPRF** 

Elaine N. Walker, KY Secretary of State

Received and Filed: 12/12/2011 2:47 PM Fee Receipt: \$145.00

Elaine N. Walker 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 2009 through 2011

**RST** 

**Exact organization name and principal office address** WARREN EAST QUARTERBACK CLUB, INC. **6867 LOUISVILLE RD BOWLING GREEN KY 42101** 

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 Re<br>MICHELLE ELKIN<br>237 GRAYSTONE<br>BOWLING GREE            | IS. Ju                          | liess<br>lie Burns<br>6 Mt. Olivet Rd.<br>Jing Green, KY | +2101                                |   |                               |
|---|---------------------------------|--|--------------------------------------|---|-------------------------------|
| Principal Officers - List the specified, officer addresses default to                 | name, address and title of all  | I current officers. All organization                     | is must list at least one (1) office | er, even in the case of<br>ng as records custodia | a sole officer. If not        |
|   | HCHELLE ELKINS                  | Crystal Mino   |                                      |   |                               |
| President E   | AVID ELKINS G                   | rea Manley   |                                      |   |                               |
|   | ENBRUNT Julia                   | e Burns  |                                      |   |                               |
|   | HCHELLE ELKINS                  | Cindy Thoms  | son                                  |   |                               |
| <b>Directors</b> - Non-profit corporatio office address.                              | ns must have at least three (3) | ) directors. All directors of the no                     | n-profit must be listed. If not sp   | ecified, director addre                           | sses default to the principal |
| MICHELLE ELKINS (3  | rea Manley                      |  | ,                                    | •   |                               |
| BOB JENKINS JULI  | E BURNS                         |  |                                      |   |                               |
| DAVID ELKINS Cru  | STAL MINOR                      |  |                                      |   |                               |
| Civer   | THOMPSON                        |  |                                      |   |                               |
| BEN   | BRUNI                           |  |                                      |   |                               |
|   |                                 |  |                                      | •   |                               |
| The above entity was admin 2009. The undersigned state satisfies the requirements of  | es that the grounds for         | dissolution either did no                                | t exist or have been eli             | minated, and the                                  | entity's name                 |
| Under penalty of perjury, the information pertaining to WA pursuant to KRS 271B.14-22 | RREN EAST QUARTE                |  |                                      |   |                               |
| If not an officer of said entire  | Durns                           | laration of Power of Atto<br>Vice Presiden               | tolW.E. QB                           | ment Application                                  | 2-7-11                        |
| Signature of officer or chairma   | n of the board (Required)       |  | Title (Required)                     |   | Date (Required)               |



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

**BOB BROOKS**Executive Director

December 12, 2011

WARREN EAST QUARTERBACK CLUB, INC. 6867 LOUISVILLE RD BOWLING GREEN KY 42101

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **WARREN EAST QUARTERBACK CLUB, 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,

Byron Durham, Revenue Auditor Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2053 FAX# 502-564-0058

Kentucky Secretary of State organization number 0054688

