Organization ID # 1068689 State of origin KY Filing fee \$115

Commonwealth of Kentucky Michael G. Adams, Secretary of St

1068689 Michael G. Adams **KY Secretary of State** Received and Filed

11/14/2023 9:39:26 AM Fee receipt: \$115.00

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

CHARLES CECIL MARTIN

Reinstatement Application and **Reinstatement Annual Report** For the year 2023

RST

Exact organization name and principal office address

ICON OWNERS ASSOCIATION, INC. **PO BOX 452 SCOTTSVILLE KY 42164**

Registered Agent and Registered Office Address

BILLY E. TURNER 1730 VETERANS MEMORIAL HIGHWAY SCOTTSVILLE, KY 42164

The principal office address and registered agent name/office address cannot be chang on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change will be filed.

Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records

President LEWIS BRENT MASON 808 HUNTERS POINTE LN, BOWLING GREEN, 42104 Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If Not specified, director addresses the principal office address. LEWIS BRENT MASON 808 HUNTERS POINTE LANE, BOWLING GREEN, KY 42104 1426 MT AYR CIRCLE, BOWLING GREEN, KY 42104 LUKE WILLIAMS PO BOX 611248, ROSEMARY BEACH, FL 32461

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. 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 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to ICON OWNERS ASSOCIATION, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: Billy Turner Title: Manager 11/14/2023

Website: www.revenue.ky.gov Phone: 502-564-8139 Fax: 502-564-0058

ICON OWNERS ASSOCIATION, INC. **PO BOX 452** SCOTTSVILLE KY, 42164

Notice Date:

November 14, 2023

KY SoS Org. ID: 1068689

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.
- 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: Megan REVY099, Taxpayer Services Specialist II

Email: MeganD.Roberts@ky.gov

Direct: 502-564-7310