Organization ID # 0578190 State of origin KY Filing fee \$130.00

Commonwealth of Kentucky Michael G. Adams, Secretary of State

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Michael G. Adams
Kentucky Secretary of State
Received and Filed:

4/26/2023 9:45 AM Fee Receipt: \$130.00

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Michael G. Adams 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 2022 through 2023

| Exact | <u>organization</u> | <u>name and</u> | principa | <u>i office ac</u> | <u>aaress</u> |
|-------|---------------------|-----------------|----------|--------------------|---------------|
| | WOODFOR | 0000 | (DDO IEC | T 00 8 DI | IATION |

WOODFORD COUNTY PROJECT GRADUATION, INC. 180 FRANKFORT ST. VERSAILLES KY 40383 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 <a href="https://htt

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|-------------------------------|--|--|--|--|--|--|
| Registered Agent and | Registered Office Add | <u>dress</u> | | Tariji. Da is | | |
| PAULAEVANS | | | | \$32.5 \$4.25 ₈ | | |
| 180 FRANKFO | ORT ST. 💎 🦸 💯 | | in the the state of the state o | "16 p. 6". | | |
| VERSAILLES, | KY 40383 | | | 200 | | |
| If the above company is in | icluded in a parent compa | iny's Kentucky tax | return as a disreg | arde | ., | ent |
| company's information he FEN: | re (optional): | | | · . | | |
| | | | | | | · |
| Principal Officers - I | lst the name, address and sses default to the principal of | title of all current of | icers. All organization orations are required t | s must list at lea to list a Secretar | ast one (1) officer, even in th y or other officer serving as | e case of a sole officer. records custodian |
| Chairman | -PAULA EVANS | - W. 504 . | DAWA | Staff | 101 Tation Ct. V | ersailles Ky 40 |
| Secretary | - JESSICA JACKS | ON- | Laur | a Wile | _ 614 Turret Ct | Versailles 40 |
| Treasurer | - KRISTEN-CHESS | ER- | Kari | Whales | 1 L22 Sheff | eld Dr. Yessail |
| 2 | t for the second se | | | 5 5 5 5 6 5 6 5 6 5 6 5 6 6 6 6 6 6 6 6 | 医克拉二氏病病 高温量 | 40 |
| Directors - Non-profit co | rporations must have at least | thrèe (3) directors. | All directors of the non | | listed. If Not specified, direct | tor addresses default to |
| PAULA EVANS | | Dai | in Staff | | 美國軍 海绵 美 | |
| KRISTEN-CHESSER | - A STORES TO A | law | n Wie. | d of the | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| JESSIGA JACKSON | - 在海外病事 | Kan | Whaten | photosic part in progression | A Shipper and a | x 1 - 1 - 1 |
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| | 15 years a feature to the | 11.5 | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |

The above entity was administratively dissolved on October 4, 2022 because the entity did not file its annual report for the year 2022. 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 273.3181. Enclosed is a check in the amount of \$130.00, 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 WOODFORD COUNTY PROJECT GRADUATION, 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 Declar | ation of Power of Attorney with the Reinstate | ement Application. |
|---|---|--------------------|
| | | 1/ / - |
| X tank halr | reasurer | 4/20/2023 |
| | | Date (Required) |
| Signature of officer Or chairman of the board (Required) | Title (Required) | Date (Required) |

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

Fax: 502-564-0058

WOODFORD COUNTY PROJECT GRADUATION, INC. Notice Date: April 25, 2023 KY SoS Org. ID: 0578190 180 FRANKFORT ST. **VERSAILLES KY, 40383**

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: Madison REV4528, Revenue Auditor I

Email: madison.chism@ky.gov

Direct: 502-564-3047