Organization ID # 0336691 State of origin Filing fee \$130

## **Commonwealth of Kentucky** Michael G. Adams, Secretary of St. KY Secretary of State

0336691 Michael G. Adams Received and Filed

1/31/2025 2:40:04 PM Fee receipt: \$130.00

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 2024 through 2025

**RST** 

Exact professional service corporation name and principal office address

> **BLUEGRASS SURGICAL ASSOCIATES, PSC** 996 WILKERSON TRACE **SUITE A5 BOWLING GREEN KY 42103**

Registered Agent and Registered Office Address

JOHN KORBA 996 WILKINSON TRACE SUITE A5 **BOWLING GREEN, KY 42103**  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

Sole Officer

JOHN L. KORBA

777 GRIDER POND RD. BOWLING GREEN, K)

Shareholders - List the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office ad

JOHN L. KORBA

777 GRIDER POND RD. BOWLING GREEN, KY. 42104

Warren County: Business size: Small

**Health Services** Business type:

The above entity was administratively dissolved on 10/12/2024 because the entity did not file its annual report for the year 2024. 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

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

Signature of Authorized Representative: CYNTHIA KORBA Title: CFO 1/31/2025

#### **Certificate of Professional Service Corporation**

I, president of said corporation, certify that all the shareholders, Not less than half of the directors, And all officers other than secretary And treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 And a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this certificate.

I hereby certify that I am authorized to submit this annual report, And I declare under penalty of perjury under the laws of Kentucky that the forgoing Is true And correct as of today.



#### **COMMONWEALTH OF KENTUCKY** OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH **EMPLOYER STATUS SECTION** P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 https://kewes.ky.gov UITax@KY.GOV

Date: 01/31/2025

BLUEGRASS SURGICAL ASSOCIATES, PSC

Dear Sir/Madam:

KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Samantha Tabor Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272

Email: UITax@KY.GOV

Kentucky Secretary of State organization number 0336691



Website: www.revenue.ky.gov

### BLUEGRASS SURGICAL ASSOCIATES, PSC 996 WILKERSON TRACE SUITE A5 **BOWLING GREEN KY, 42103**

Notice Date:

January 31, 2025

KY SoS Org. ID: 0336691

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.
- 3. 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.

**AGENT INFORMATION**  If you have any questions regarding this notice, please contact me. Thank you.

Agent: William REV4818, Revenue Auditor I

Email: William.Correll@ky.gov

Direct: 502-564-7387