Organization ID # 0521196 State of origin Filing fee

KY \$145.00

**Commonwealth of Kentucky** Trey Grayson, Secretary of State 0521196.09

bschell **PRPF** 

Trey Grayson, Secretary of State

Received and Filed: 12/14/2010 2:00 PM Fee Receipt: \$145.00

Trey Grayson 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 2008 through 2010

**RST** 

Exact organization name and principal office address PAICALREE, INC. 110 NORTH LOCUST HILL DR **LEXINGTON KY 40509** 

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

RICHARD A. ROUBIC **4001 NICHOLASVILLE ROAD LEXINGTON, KY 40503** 



| <b>Principal Office</b>                | rs - List the name, address and title of all cun                            | rent officers. All organizations must list at least one (1) o  | fficer, even in the case of a sole officer.                           |
|--|---|--|---|
| President                              | RICHARD A. ROUBIC   |  |   |
| Secretary                              | BETSY D ROUBIC  |  |   |
|  |   |  |   |
| Directors - List the                   | e name and address of all directors (if applicable                          | e).No listing of directors is verification that the corporatio   | n has dispensed with directors.                                       |
|  |   |  |   |
|  |   |  |   |
|  |   |  |   |
|  |   |  |   |
| 2008. The undersi                      | igned states that the grounds for dis-                                      | ovember 1, 2008 because the entity did no<br>solution either did not exist or have been o<br>sed is a check in the amount of \$145.00, | eliminated, and the entity's name                                     |
| Under penalty of prinformation pertain | perjury, the Kelow signed hereby auth<br>ning to PA/CALREE, INC. to the Sec | horizes the Kentucky Department of Reve<br>cretary of State, as required for reinstatem  | nue to release any applicable tax<br>ent pursuant to KRS 271B.14-220. |
| If not an officer of                   | said entity, please provide a Declara                                       | ation of Power of Attorney with the Reinsta  | tement Application.   |
| X                                      | 5/2   | Resident   | ızlıvhu   |

Signature of officer or chairman of the board (Required)

Title (Required)

Date (Required)



## EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

**Steven L. Beshear** Governor

Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso
Executive Director

| Date: 12/14/2010 |  |  |
|------------------|--|--|
| PAICALREE, INC.  |  |  |
| Dear Sir/Madam:  |  |  |
|                  |  |  |

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

KRS 271B.14-220(1)(e) CERTIFICATE

Sincerely,

Anthony Hudgins
Division of Unemployment Insurance
275 East Main Street, 2-EH
Frankfort, Kentucky 40621
Phone: (502) 564-2272

Kentucky Secretary of State organization number 0521196





THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

DON RICHARDSON Executive Director

December 14, 2010

PAICALREE, INC. 110 NORTH LOCUST HILL DR LEXINGTON KY 40509

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **PAICALREE**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, and has paid the taxes shown to be due or assessed as of the date of this letter. 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.

Sincerely,

Marcia Oakman, Revenue Auditor Division of Corporation Tax 501 High Street, 7th Floor, Sta. 52 Frankfort, KY 40601 502-564-7315 FAX# 502-564-0058

Kentucky Secretary of State organization number 0521196

