

Organization ID # 0473697  
State of origin KY  
Filing fee \$340.00

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

0473697.09 mstratton  
PRPF  
Alison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
12/21/2015 12:31 PM  
Fee Receipt: \$340.00

Alison Lundergan Grimes  
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 2000 through 2015

RST

Exact organization name and principal office address

NEWPORT CARSTAR COLLISION, INC.  
111 E 10TH ST  
NEWPORT KY 41071

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/fsearch](http://app.sos.ky.gov/fsearch) or can be downloaded from our website.

Registered Agent and Registered Office Address

QI SERVICES-KENTUCKY INC.  
50 E RIVERCENTER BLVD STE 1400  
COVINGTON, KY 41011

**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 sole 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 custodian.


President	GREGORY M THEOBALD	5662 VISTA POINT DR MAINEVILLE OH 45039
Vice-President	STEVEN THEOBALD	2155 E FOSTER MAINEVILLE MO 64655
Secretary	DEBORAH TILNE	PO BOX 309 MAINEVILLE OH 45039
Treasurer		

**Directors** - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address.

The above entity was administratively dissolved on November 1, 2000 because the entity did not file its annual report for the year 2000. 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 271B.14-210. Enclosed is a check in the amount of \$340.00, 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 NEWPORT CARSTAR COLLISION, 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 Declaration of Power of Attorney with the Reinstatement Application.

<input checked="" type="checkbox"/> 	CEO	12/2/15
Signature of officer or chairman of the board (Required)	Title (Required)	Date (Required)



**DANIEL P. BORK**  
Commissioner

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

**ELYSE WEIGEL**  
Deputy Commissioner

**BOB BROOKS**  
Executive Director

December 21, 2015

**NEWPORT CARSTAR COLLISION, INC.  
111 E 10TH ST  
NEWPORT KY 41071**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **NEWPORT CARSTAR COLLISION, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2014, 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,

Nicole REVX129, Taxpayer Services Specialist II  
Division of Corporation Tax  
501 High Street, Mail Sta. 52  
Frankfort, KY 40601  
502-564-2062  
FAX# 502-564-0058

Kentucky Secretary of State organization number 0473697



**COMMONWEALTH OF KENTUCKY  
DIVISION OF UNEMPLOYMENT INSURANCE**

TAX ENFORCEMENT BRANCH  
EMPLOYER STATUS SECTION  
275 E MAIN ST, 2-EH  
FRANKFORT, KY 40621-0001  
(502) 564-2272  
<https://kewes.ky.gov>  
DES.UIT@KY.GOV

Date: 12/21/2015

NEWPORT CARSTAR COLLISION, INC.

Dear Sir/Madam:

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

The Division 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,

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

Kentucky Secretary of State organization number 0473697