

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State



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 year 2023

**RST**

**Exact organization name and principal office address**

**GRAYSON COUNTY HEALTHCARE FOUNDATION, INC.  
100 WABUCK DR.  
SUITE B  
LEITCHFIELD KY 42754**

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 will be filed.

**Registered Agent and Registered Office Address**

Trevor Ray  
100 Wabuck Dr.  
Suite B  
Leitchfield, KY 42754

**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 manager.

President	TREVOR RAY	GRAYSON COUNTY HEALTHCARE FOUNDATION 1300 TOMMIE RAY RD, CANEYVILLE, KY 42721
Secretary	EDWIN MCKINNEY	GRAYSON COUNTY HEALTHCARE FOUNDATION 260 HANGING ROCK FD, LEITCHFIELD, KY 42754
Treasurer	EDWIN MCKINNEY	GRAYSON COUNTY HEALTHCARE FOUNDATION 260 HANGING ROCK FD, LEITCHFIELD, KY 42754
Vice President	GARRY WATKINS	GRAYSON COUNTY HEALTHCARE FOUNDATION 1625 ELIZABETHTOWN RD., LEITCHFIELD, KY 42754

**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 default to the principal office address.

JOEL BERNARD	GRAYSON COUNTY HEALTHCARE FOUNDATION, 464 PEARSON BRANCH RD., CLARKSON, KY 42726
KEVIN BROOKS	GRAYSON COUNTY HEALTHCARE FOUNDATION, 12 ADEN RIDGE, LEITCHFIELD, KY 42754
ANTHONY SMITH	GRAYSON COUNTY HEALTHCARE FOUNDATION, 901 WALL AVE, LEITCHFIELD, KY 42754
DAVID DOWNS	GRAYSON COUNTY HEALTHCARE FOUNDATION, 890 LOGAN LEITCHFIELD, KY 42754
RAYE MONTGOMERY	GRAYSON COUNTY HEALTHCARE FOUNDATION, 108 SUNS DR., LEITCHFIELD, KY 42754
STEVE MEREDITH	GRAYSON COUNTY HEALTHCARE FOUNDATION, 1424 BYR GROVE RD., LEITCHFIELD, KY 42754
TOM GOFF	GRAYSON COUNTY HEALTHCARE FOUNDATION, P.O. BOX LEITCHFIELD, KY 42754
STEVEN SMITH	GRAYSON COUNTY HEALTHCARE FOUNDATION, 100 VALLI VIEW DR., LEITCHFIELD, KY 42754

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 and all applicable tax information pertaining to Grayson County Healthcare Foundation, Inc. to the Department of Revenue for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: **Brittany Clemons** Title: **Executive Director**

**1101899**

**Michael G. Adams**

**KY Secretary of State**

Received and Filed

**11/13/2023 1:31:20 PM**

**Fee receipt: \$115.00**





**KENTUCKY DEPARTMENT OF REVENUE**  
**DIVISION OF CORPORATION TAX**  
501 HIGH STREET, STATION 52  
FRANKFORT, KENTUCKY 40601-2103

Website: [www.revenue.ky.gov](http://www.revenue.ky.gov)  
Phone: 502-564-8139  
Fax: 502-564-0058

**Grayson County Healthcare Foundation, Inc.**  
**910 Wallace Ave**  
**Leitchfield KY, 42754**

Notice Date: November 13, 2023  
KY SoS Org. ID: 1101899

**RE:** *Letter of Good Standing Request - Approved*

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**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>.

**CONTACT  
INFORMATION**

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

Agent: James REVE277, Taxpayer Services Specialist II  
Email: [James.Sutherland@ky.gov](mailto:James.Sutherland@ky.gov)  
Direct: 502-564-7359