Organization ID # 0004512 State of origin

**Commonwealth of Kentucky** Filing fee \$115.00 Alison Lundergan Grimes, Secretary of St 0004512.09

Fee Receipt: \$115.00

Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 1/3/2013 1:47 PM

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 year 2012

**Exact organization name and principal office address BLUE GRASS CHRISTIAN CAMP** 7463 ATHENS BOONESBORO RD. **LEXINGTON KY 405099718** 

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

KELLY S. BRANDENBURG 7463 ATHENS BOONESBORO RD LEXINGTON, KY 40509

Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) or

specified, officer addresses defaul	t to the principal office address. Corpor	rations are required to list a Secretary or other officer serving as recor	us custodian
Vice President	STONE DONALDSON		
President	TOM CRUZE		
Treasurer	JANIE TRUESDELL		
· · · · · · · · · · · · · · · · · · ·			
<b>Directors</b> - Non-profit corpor office address.	ations must have at least three (3) dire	ectors. All directors of the non-profit must be listed. If not specified, directors.	ector addresses default to the principal
JAMES GENTRY			
JAMES H MARCUM II			
BILLY REYNOLDS			
2012. The undersigned st	tates that the grounds for diss	eptember 11, 2012 because the entity did not file its a solution either did not exist or have been eliminated. It is a check in the amount of \$115.00, payable to Ke	, and the entity's name
		horizes the Kentucky Department of Revenue to rele CAMP to the Secretary of State, as required for reins	
lf not an offider of sajd en	tity please provide a Declara	ation of Power of Attorney with the Reinstatement Ap	oplication.
x fulls	-fkn-	CHAIRMAN OF THE BOARD	9/17/12
Signatuline of officer or chair	rman/of the board (Required)	Title (Required)	Date (Required)



THOMAS B. MILLER
Commissioner

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

**ELYSE WEIGEL**Deputy Commissioner

**BOB BROOKS**Executive Director

January 3, 2013

BLUE GRASS CHRISTIAN CAMP 7463 ATHENS BOONESBORO RD. LEXINGTON KY 405099718

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **BLUE GRASS CHRISTIAN CAMP** is exempt from filing a Kentucky Corporation Income Tax Return pursuant to KRS 141.040, KRS 141.0401 and KRS 136.070. This exemption does not apply to any other taxes administered by the Commonwealth of Kentucky. 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.

Any changes in the corporation's articles of incorporation, by-laws, method of reporting, name or address, or ruling by the Internal Revenue Service must be reported to this office.

Sincerely,

Lamarr Wallace, Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7315 FAX# 502-564-0058

Kentucky Secretary of State organization number 0004512

