Organization ID # 0543435 State of origin KY

Commonwealth of Kentucky

Filing fee \$115.00 Alison Lundergan Grimes, Secretary of S

0543435.09 mstratton NPRF

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 11/15/2017 2:17 PM Fee Receipt: \$115.00

TOT

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 2017

Exact organization name and principal office address

THE OWINGSVILLE-BATH COUNTY MINISTERIAL ASSOCIATION, INC. P.O. BOX 1339
OWINGSVILLE KY 40360

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.

egistered Agent and Registered Office Address			FEIN (Cotional)			
BRUCE TRU						
92 COYLE S	LE, KY 40360					
the above company is	included in a parent compan	v's Kentucky tax re	turn as a disregard			ent
ompany's information h		,				
EIN:	Name:					
ringinal Officers	List the name address and title	of all current officers. All	Lorganizations must list at	least or	e (1) offic∈r, even in the case of a sole	officer If not
pecified, officer addresses d	efault to the principal office address	s. Corporations are requ	uired to list a Secretary or	other of	icer serving as records custodian	
President	CHRIS BAILEY					
Secretary	~COWELL G-RICE		LOWELL	C	RICE	
reasurer	SEAN BAILEY					
Directors - Non-profit c	orporations must have at least thre	e (3) directors. All direct	ors of the non-profit must	be listed	I. If not specified, director addresses d	efault to the princip
REV. JEWELL C RI	<u>CE:</u>					
	<u>CE</u>	SEAN I	SAILEI			
SEAN BAILEY	<u>CE</u>	SEAN TO				
SEAN BAILEY COWELL C RICE	<u>CE</u>					
REV. JEWELL C'RI SEAN BAILEY COWELL C RICE CHRIS BAILEY		LOWELL	C RICE			

The above entity was administratively dissolved on October 9, 2017 because the entity did not file its annual report for the year 2017. 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 273.3181. Enclosed is a check in the amount of \$115.00, 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 THE OWINGSVILLE-BATH COUNTY MINISTERIAL ASSOCIATION, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an office of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

ir not an onicer of said entity, please provide a Decia	iration of Fower of Attorney with the Remstate	anient Application.
X Cola Ban	PRESIDENT	11-13-17
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

November 15, 2017

THE OWINGSVILLE-BATH COUNTY MINISTERIAL ASSOCIATION, INC. P.O. BOX 1339 OWINGSVILLE KY 40360

Re: Request for a Letter of Good Standing

Based upon the Department of Revenue records and the information submitted, **THE OWINGSVILLE-BATH COUNTY MINISTERIAL ASSOCIATION, INC.** 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,

Ramon REV4636, Taxpayer Services Specialist I Pass Through Entity Branch 501 High Street, Mail Station 52 Frankfort, KY 40601 Phone# (502) 564-2169 Fax# (502) 564-0058

Kentucky Secretary of State organization number 0543435

