

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

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**Decennial Report of  
Association Continued Existence**  
(54 Pa.C.S. § 503)

Name		
_____		
Address		
_____		
City	State	Zip Code
_____	_____	_____

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Fee: \$70

In compliance with the requirements of 54 Pa.C.S. § 503 (relating to decennial filings required) the undersigned association hereby states that:

1. The name of the association to which this report relates is:

\_\_\_\_\_

2. The (a) address of this association's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
_____				
(b) Name of Commercial Registered Office Provider				County
_____				

3. The association has not during the preceding ten years made any filing in the Department a permanent record of which is retained by the Department.

4. The association continues to exist.

IN TESTIMONY WHEREOF, the undersigned association has caused this Decennial Report of Association Continued Existence to be signed by a duly authorized officer this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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Name of Association

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Signature

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Title