


**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: <hr/> Name <hr/> Address <hr/> City State Zip Code <hr/> <input type="checkbox"/> Return document by email to: _____	<p>Decennial Report of Association Continued Existence DSCB:54-503 (rev. 7/2015)</p>  503
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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. Complete part (a) or (b) – not both (*address in this field must match Department records*):

(a) The address of this association’s registered office in this Commonwealth is:

Number and Street City State Zip County

(b) The name of this association’s commercial registered office provider and county of venue is:

c/o: _____
Name of Commercial Registered Office Provider County

3. Change of address. Complete part (a) **or** (b) below *only if* there has been a changed of registered office address:

(a) The registered office address of the association in this Commonwealth is changed to:

Number and Street City State Zip County

(b) The registered office of the association is provided by:

c/o: _____
Name of Commercial Registered Office Provider County

4. The association has not made any filing in the Department from January 1, 2012 through December 31, 2021, in accordance with 54 Pa.C.S. § 503(b).

5. 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 _____, 20_____.

Name of Association

Signature

Title