

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

<p>Return document by mail to:</p> <hr/> <p>Name</p> <hr/> <p>Address</p> <hr/> <p>City State Zip Code</p> <p>Return document by email to: _____</p>	<p>Decennial Report of Association Continued Existence DSCB:54-503 (rev. 7/2015)</p>  <p>503</p>
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Read all instructions prior to completing.

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 address of this association's current registered office in the Commonwealth or name of its commercial registered office provider and the county of venue is:

Number and Street/Commercial Registered Office Provider City State Zip County

3. Complete part A **or** B if applicable:

- A. The address to which the registered office of the association in this Commonwealth is to be changed to:

Number and Street City State Zip County

- B. The registered office of the association shall be provided by:

Name of Commercial Registered Office Provider County

4. The association has not made any filing in the Department from January 1, 2002 through December 31, 2011, 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

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
P.O. Box 8722
Harrisburg, PA 17105-8722
(717) 787-1057
Web site: www.dos.pa.gov/corps

Instructions for Completion of Form:

- A. Typewritten is preferred. If handwritten, the form shall be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70 made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- B. Enter the entity name as identified in the records of the Department of State in Item 1. If the name has been changed, an Amendment form must be filed separately to effect this change on the Department's records.
- C. Enter the registered office as identified in the records of the Department of State in Item 2. If the address has been changed, the current registered office or Commercial Registered Office Provider and County of Venue should be identified in Item 3. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- D. In accordance with 54 Pa.C.S. § 503(b), no filing of this form is required if the association has made any filing in the Department from January 1, 2002 through December 31, 2011, other than a decennial report, application for registration of fictitious name, consent to appropriation of name, name searches or name reservations. Additionally, no filing of this form is required if the association has had officer information forwarded to the department by the Department of Revenue from January 1, 2002 through December 31, 2011, under 15 Pa.C.S. § 1110 (relating to annual report information).
- E. This form and all accompanying documents shall be mailed to the address shown above.