



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Certificate Request Form**

**Request Information** (*Entity Name is only required for a Certificate of Non-Existence*)

ID	ENTITY NAME	CERTIFICATE TYPE
000047643	ST. CLAIR ANNEX, INC.	Long Form Good Standing

**Total Fee: \$32.00**

**Filer's Contact Information**

(*Enter a contact name, mailing address and email.*)

Contact Name: JAMES NICHOLAS

Business Name: ST. CLAIR ANNEX, INC.

No. and Street: 141 BAY ST.

City or Town: WESTERLY

State: RI

Zip: 02891

Country: USA

Contact Phone: (860) 460-2870 ext:

Contact Email: JANICHOLA@GMAIL.COM

**Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.**