



**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
000067623	Narragansett Bay Wheelmen, Inc.	Good Standing Certificate

Total Fee: \$7.00

Filer's Contact Information

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

Contact Name: RICK SCHWARTZ

Business Name: NARRANGANSETT BAY WHEELMEN

No. and Street: 1756 S MAIN ST

City or Town: FALL RIVER

State: MA

Zip: 02724

Country: USA

Contact Phone: (508) 496-9570 ext:

Contact Email: TREASURER@NBWCLUB.ORG

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.