



**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
000096446	WB Community Health	Good Standing Certificate

Total Fee: \$57.00

Filer's Contact Information

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

Contact Name: ALAN LORD

Business Name: WB COMMUNITY HEALTH

No. and Street: 300 JEFFERSON BLVD
SUITE 205

City or Town: WARWICK

State: RI Zip: 02888 Country: USA

Contact Phone: (401) 497-5517 ext:

Contact Email: ALORD@WBCOMMUNITYHEALTH.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.