



State of Rhode Island
Department of State - Business Services Division

REINSTATEMENT

1. Entity ID Number: 973737	2. The name of the entity is: The American College of Health Care Administrators, Rhode Isl																											
3. Date of Revocation: 4/18/2018	4. Reason for Revocation: Annual Report																											
5. Entity Type: Non-Profit Corporation																												
6. The reinstatement requirements are: <table><tr><td><input checked="" type="checkbox"/> Annual Reports (# of reports) 7</td><td>(report filing fee) \$ 20.00</td><td>Total Fees \$ 140.00</td></tr><tr><td><input checked="" type="checkbox"/> Penalty fees (# of years) 6</td><td>(penalty fee) \$ 25.00</td><td>Total Fees \$ 150.00</td></tr><tr><td><input type="checkbox"/> Replacement filing fee \$</td><td></td><td></td></tr><tr><td><input type="checkbox"/> LOGS (Tax Good Standing)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Legislative Act/Court Order</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Change of Agent Form (filing fee) \$</td><td></td><td></td></tr><tr><td><input checked="" type="checkbox"/> Change of Registered Office Form - NO FEE</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Certificate of Correction</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Amendment (name change required)</td><td></td><td></td></tr></table>		<input checked="" type="checkbox"/> Annual Reports (# of reports) 7	(report filing fee) \$ 20.00	Total Fees \$ 140.00	<input checked="" type="checkbox"/> Penalty fees (# of years) 6	(penalty fee) \$ 25.00	Total Fees \$ 150.00	<input type="checkbox"/> Replacement filing fee \$			<input type="checkbox"/> LOGS (Tax Good Standing)			<input type="checkbox"/> Legislative Act/Court Order			<input type="checkbox"/> Change of Agent Form (filing fee) \$			<input checked="" type="checkbox"/> Change of Registered Office Form - NO FEE			<input type="checkbox"/> Certificate of Correction			<input type="checkbox"/> Amendment (name change required)		
<input checked="" type="checkbox"/> Annual Reports (# of reports) 7	(report filing fee) \$ 20.00	Total Fees \$ 140.00																										
<input checked="" type="checkbox"/> Penalty fees (# of years) 6	(penalty fee) \$ 25.00	Total Fees \$ 150.00																										
<input type="checkbox"/> Replacement filing fee \$																												
<input type="checkbox"/> LOGS (Tax Good Standing)																												
<input type="checkbox"/> Legislative Act/Court Order																												
<input type="checkbox"/> Change of Agent Form (filing fee) \$																												
<input checked="" type="checkbox"/> Change of Registered Office Form - NO FEE																												
<input type="checkbox"/> Certificate of Correction																												
<input type="checkbox"/> Amendment (name change required)																												
7. Accompanied by																												

FILED

NOV 27 2023
BY HKIMA
A.A. 4:08pm.