



State of Rhode Island
 Department of State - Business Services Division

REINSTATEMENT

1. Entity ID Number: 000145729	2. The name of the entity is: CRANSTON COMMERCIAL CONDOMINIUM ASSOCIATION,																																				
3. Date of Revocation: 9/16/2024	4. Reason for Revocation: Annual Report																																				
5. Entity Type: Non-Profit Corporation																																					
6. The reinstatement requirements are: <table style="width: 100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/></td> <td>Annual Reports (# of reports) 1</td> <td>(report filing fee) \$ 20</td> <td>Total Fees \$ 20</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Penalty fees (# of years) 1</td> <td>(penalty fee) \$ 25</td> <td>Total Fees \$ 25</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Replacement filing fee \$</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>LOGS (Tax Good Standing)</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Legislative Act/Court Order</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Change of Agent Form (filing fee) \$</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Change of Registered Office Form - NO FEE</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Certificate of Correction</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Amendment (name change required)</td> <td></td> <td></td> </tr> </table>		<input checked="" type="checkbox"/>	Annual Reports (# of reports) 1	(report filing fee) \$ 20	Total Fees \$ 20	<input type="checkbox"/>	Penalty fees (# of years) 1	(penalty fee) \$ 25	Total Fees \$ 25	<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 type="checkbox"/>	Change of Registered Office Form - NO FEE			<input type="checkbox"/>	Certificate of Correction			<input type="checkbox"/>	Amendment (name change required)		
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7. Accompanied by																																					

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