



**State of Rhode Island
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

ID	ENTITY NAME	CERTIFICATE TYPE
000083207	Glocester Road Co.	Certificate of Status - Revoked

Filer's Contact Information

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

Contact Name: RICHARD OKEEFE

Business Name:

No. and Street: 39 LOST ACRES RIVE

City or Town: CHEPACHET

State: CT

Zip: 02814

Country: USA

Contact Phone: 8609499099 ext:

Contact Email: builderxl@yahoo.com