



## Instructions for Filing Non-Profit Corporation Statement of Change of Registered Office

[Section 7-6-13\(d\)](#) and [7-6-78\(d\)](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

**This legal document should be typed. All illegible documents will be REJECTED.**

### How to complete the form:

1. List the entity's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#).
2. List the name of the corporation. The entity name can be verified through our [Corporate Database](#). If the corporate name has changed an amendment, form [201](#) or form [251](#), must be filed with this office. [Electronic filing](#) may be available.
3. List the address of the registered office as **PRESENTLY** shown in the records on file with our office. The entity's registered office can be verified through our [Corporate Database](#).
4. List the address of the **NEW** registered office. A Rhode Island street address is required, **NOT** a P.O. Box. In addition to all legal service of process, other important correspondence from the state will be sent to this address.
5. A copy of this Statement has been mailed to the corporation (applicable when agent records the statement).
6. If recorded by the corporation, the change was authorized by a resolution duly adopted by its board of directors.
7. The Registered Agent/President or Vice President **MUST** sign and date the form.

### How to pay the filing fee:

There is no filing fee to record a statement of change of registered office.

### How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will **NOT** result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#)
- Enter the name or ID number of your entity and click "Search"
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing"
- Identify desired type of filing and click on "PDF" under "Files" to view and print the record
- Filing rejections can be viewed online, via the [Rejected Filings Viewer](#) on our website.

### How to maintain your status:

The corporation is responsible for filing an annual report each calendar year, excluding the year of incorporation, between June 1 and June 30. A courtesy reminder will be mailed to the registered agent prior to June 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office may result in the revocation of the Certificate of Incorporation/ Authority pursuant to RIGL [7-6-56](#) and [7-6-85](#).

Every entity registered with the Rhode Island Department of State - Business Services Division may have filing requirements with the [Rhode Island Division of Taxation](#), even if no business is conducted within Rhode Island for a particular year. Your business may require additional licensing. Please visit our [website](#) for further information.



### Statement of Change of Registered Office

DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee

STAMP

FOR SECRETARY OF STATE USE ONLY

Pursuant to the provisions of RIGL [7-6-13\(d\)](#) or [7-6-78\(d\)](#) the undersigned submits the following statement for the purpose of changing its registered office in the State of Rhode Island:



1. Entity ID Number		2. Exact Name of the Corporation	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address			
City/Town	State	Zip	
	<b>RHODE ISLAND</b>		
4. The address of the <b>NEW</b> registered office is:			
Street Address ( <u>NOT</u> a P.O. Box)			
City/Town	State	Zip	
	<b>RHODE ISLAND</b>		
5. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
6. If recorded by the corporation, the change was authorized by a resolution duly adopted by its board of directors.			
<i>Under penalty of perjury, I declare and affirm that I have examined these Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>			
Name of the Registered Agent/President or Vice President of the Corporation			Date
Signature of the Registered Agent/President or Vice President of the Corporation			
SIGN DOCUMENT HERE			

**MAIL TO:**

**Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

**Phone:** (401) 222-3040

**Website:** www.sos.ri.gov

STAMP

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## Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: