

**PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU**

Statement of Revival-Domestic

(15 Pa.C.S.)

Business Corporation (§ 1341)

Nonprofit Corporation (§ 5341)

Name		

Address		

City	State	Zip Code
_____	_____	_____

Document will be returned to the name and address you enter to the left.



Fee: \$70

In compliance with the requirements of the applicable provisions (relating to statement of revival), the undersigned forfeited or expired corporation, desiring to procure a revival of its charter or articles, hereby states that:

1. The name of the corporation at the time its charter or articles were forfeited or expired is:

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County

(b) Name of Commercial Registered Office Provider	County			
c/o:	_____			

3. The statute by or under which it was incorporated:

4. The date of its incorporation:

5. *(Strike out if inapplicable)*: The name the corporation adopted as its new name, in view of the prior appropriation of its former name by a senior corporation is:

6. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and Street	City	State	Zip	County
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(b) Name of Commercial Registered Office Provider	County
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c/o:

7. *Check and complete one of the following:*

The charter or articles of the corporation were forfeited by declaration under Section 1704 of the act of April 9, 1929 (P.L.343, No.176), known as The Fiscal Code and published at _____, Pa.B. _____.

The charter or articles of the corporation expired by their own terms under the provisions of the charter or articles set forth in full in Exhibit A attached hereto and made a part hereof.

8. The corporate existence of the corporation shall be revived.

9. The filing of this statement has been authorized by the corporation.

IN TESTIMONY WHEREOF, the undersigned corporation has caused this Statement of Revival to be executed this _____ day of _____, _____.

Name of Corporation

Signature

Title



**Department of State
Corporation Bureau
P.O. Box 8722
Harrisburg, PA 17105-8722
(717) 787-1057
web site: www.dos.state.pa.us/corps**

Instructions for Completion of Form:

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$70 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).
 - (2) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation of Name).
 - (3) In the case of a forfeited corporation, tax clearance certificates from the Department of Revenue and from the Bureau of Employment Security of the Department of Labor and Industry evidencing payment of all taxes and charges payable to the Commonwealth.
 - (4) *Nonprofit Corporation* – Any necessary governmental approvals.
- D. There is no official publication requirement incident to the filing of this form.
- E. A forfeited or expired corporation may authorize the filing of this form by action of its last directors or may elect directors and officers under the Business/Nonprofit Corporation Law of 1988 for the limited purpose of authorizing the filing.
- F. The corporation may not revive its corporate charter where it has been revoked by a court proceeding instituted by the Attorney General's Office under 15 Pa.C.S. § 503 (relating to actions to revoke corporate franchises).
- G. This form and all accompanying documents shall be mailed to the above stated address.