



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/14/2009	200928601646	DOMESTIC/REINSTATEMENT (REN)	25.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

STEVEN E PATTON ESQ
23 BELL ST
CHAGRIN FALLS, OH 44022

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

186716

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

CHAGRIN VALLEY LITTLE THEATRE

and, that said business records show the filing and recording of:

Document(s)
DOMESTIC/REINSTATEMENT

Document No(s):
200928601646



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 13th day of October, A.D.
2009.

Ohio Secretary of State



Form 525B Prescribed by the:
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)

www.sos.state.oh.us
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Expedite this form: (select one)
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☐ Expedite PO Box 1390
Columbus, OH 43216

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Columbus, OH 43216

REINSTATEMENT

Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)

(1) ☒ Reinstatement of a Nonprofit Corporation
(for failure to file a statement of
continued existence)
(109-RENN)

(2) ☐ Reinstatement of a Limited Liability Partnership
(for failure to file biennial report(s))
(112-PLR)

THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT
BIENNIAL REPORT(S) AND FILING FEE(S)

(3) ☐ Reinstatement of a Professional Corporation
(for failure to file biennial report(s))
(110-RENP)

THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT
BIENNIAL REPORT(S) AND FILING FEE(S)

Name of Entity

Chagrin Valley Little Theatre

Charter/Registration Number

186716

Cancellation Date

The entity was canceled on

11/7/08

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

REQUIRED

Must be
authenticated
(signed) by an
authorized
representative
(See Instructions)

Signature

Thomas Neff, President

Print Name

Signature

Print Name

Date

Date