

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004724

FILED
Mar 11, 2009
Secretary of State

Entity Name: JOHN B. SULLIVAN, JR. CORPORATION OF NH, INC.

Current Principal Place of Business:

19 KILTON ROAD
BEDFORD, NH 03110

New Principal Place of Business:

258 SOUTH RIVER ROAD
BEDFORD, NH 03110

Current Mailing Address:

19 KILTON ROAD
BEDFORD, NH 03110

New Mailing Address:

258 SOUTH RIVER ROAD
BEDFORD, NH 03110

FEI Number: 02-0358793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, JOHN B SR
633 ISLE OF PALMS DRIVE
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SULLIVAN, THOMAS F
Address: 118 HITCHINGPOST LANE
City-St-Zip: BEDFORD, NH 03054

Title: ST () Delete
Name: SULLIVAN, JOHN B JR
Address: 4 ATWOOD LANE
City-St-Zip: BEDFORD, NH 03110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS F. SULLIVAN

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date