


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F92000000108**  
 1. Entity Name  
**NEW HAMPSHIRE STRUCTURES UNLIMITED, INC.**



Principal Place of Business  
**88 PINE STREET  
 MANCHESTER, NH 03103**

Mailing Address  
**P.O. BOX 4105  
 LICENSING DEPT  
 MANCHESTER, NH 03108-4105**

**DO NOT WRITE IN THIS SPACE**



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>02-0275498</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**THE PRENTICE-HALL CORPORATION SYSTEM INC  
 1201 HAYES ST  
 SUITE 105  
 TALLAHASSEE, FL 32301**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000481474  
 04/11/06-80033-016 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KELLER, ROBERT R JR ROCKY POINT ROAD BOW, NH 03304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GARFIELD, KATHERINE 13 AUDLEY DIVIDE BOW, NH 03304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KELLER, ROBERT R 10 HERITAGE ROAD BEDFORD, NH 03102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLER, RICHARD R STRAWBERRY HILL ROAD BEDFORD, NH 03102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KELLER, BRUCE M 1111 CANDIA ROAD MANCHESTER, NH 03109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Katherine Garfield **Katherine Garfield** 3-7-06 603 627-7877  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #