

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000108

FILED
Apr 14, 2008
Secretary of State

Entity Name: NEW HAMPSHIRE STRUCTURES UNLIMITED, INC.

Current Principal Place of Business:

88 PINE STREET
MANCHESTER, NH 03103

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4105
LICENSING DEPT
MANCHESTER, NH 031084105

New Mailing Address:

FEI Number: 02-0275498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES ST
SUITE 105
TALLAHASSEE, FL 32301 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: PD () Delete
Name: KELLER, ROBERT R JR
Address: 41 UNION STREET
City-St-Zip: MANCHESTER, NH 03103

Title: STD () Delete
Name: GARFIELD, KATHERINE
Address: 41 UNION STREET
City-St-Zip: MANCHESTER, NH 03103

Title: CD () Delete
Name: KELLER, ROBERT R
Address: 41 UNION STREET
City-St-Zip: MANCHESTER, NH 03103

Title: D () Delete
Name: KELLER, RICHARD R
Address: 41 UNION STREET
City-St-Zip: MANCHESTER, NH 03103

Title: VP () Delete
Name: KELLER, BRUCE M
Address: 1111 CANDIA ROAD
City-St-Zip: MANCHESTER, NH 03103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: KATHERINE GARFIELD

STD

04/14/2008

Electronic Signature of Signing Officer or Director

_____ Date