~~2005~~ FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000014358

1. Entity Name
SNO-BIRD PROPERTIES INC.

Principal Place of Business	Mailing Address
C/O CHRISTOPHER J LITTLEFIELD 10 PRINCE STREET CUMBERLAND, ME 04021	C/O CHRISTOPHER J LITTLEFIELD 10 PRINCE STREET CUMBERLAND, ME 04021

DO NOT WRITE IN THIS SPACE

04282006 No Chg-P CR2E034 (11/05)

4. FEI Number
01-0523798
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LITTLEFIELD, CHRISTOPHER J
673 BAY ESPLANDE DR #201
CLEARWATER BEACH, FL 33765

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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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LITTLEFIELD, CHRISTOPHER
STREET ADDRESS	10 PRINCE STREET
CITY-ST-ZIP	CUMBERLAND, ME 04021
TITLE	VP
NAME	LITTLEFIELD, DONALD
STREET ADDRESS	63 DEANE STREET
CITY-ST-ZIP	PORTLAND, ME 04102
TITLE	S
NAME	CHICK, MARY
STREET ADDRESS	75 BROOK ROAD
CITY-ST-ZIP	PORTLAND, ME 04103
TITLE	T
NAME	LITTLEFIELD, PATRICIA
STREET ADDRESS	33 HAWTHORNE STREET
CITY-ST-ZIP	PORTLAND, ME 04103
TITLE	D
NAME	BOURGUE, PHILIP
STREET ADDRESS	36 BETTLEWOOD ROAD
CITY-ST-ZIP	MARLLOW, NJ 18153
TITLE	D
NAME	LITTLEFIELD, GEORGE W
STREET ADDRESS	45 EASTERN PROMENADE
CITY-ST-ZIP	PORTLAND, ME 04101

U00000565374
05/20/06-80129-010 150.00

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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: Christopher J Littlefield Christopher J Littlefield 4/28/06 207-829-5582
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #