



State of New Hampshire 2010 NON PROFIT REPORT

REPORT DUE BY December 31, 2010

Filed

Date Filed: 08/30/2010

Business ID: 71154

William M. Gardner

Secretary of State

"THE SUNAPEE ENVIROMENTAL PROTECTION, TENNIS AND INTRA-ISLAND CHC

GREAT ISLAND, LAKE SUNAPEE

NEWBURY, NH 03255

ADDRESS OF PRINCIPAL OFFICE:

GREAT ISLAND, LAKE SUNAPEE

NEWBURY, NH 03255

REGISTERED AGENT AND OFFICE: (foreign only)

ENTITY TYPE: NONPROFIT

BUSINESS ID: 71154

STATE OF DOMICILE: NEW HAMPSHIRE

Operates septic system for 16 cottages on Great Island, Lake Sunapee

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address **Lois M. Logan, 2795 Williamsburg Bantam Rd., Bethel, OH 45106**

☒ The new principal office address **c/o Ron Wyman, P.O. Box 388, Sunapee, NH 03782**

PO Box is acceptable.

OFFICERS

NAME AND OFFICERS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

TREAS. **Lois M. Logan**
STREET **2795 Williamsburg Bantam Road**
CITY/STATE/ZIP **Bethel OH 45106**

SEC'Y. **Lois M. Logan**
STREET **2795 Williamsburg Bantam Road**
CITY/STATE/ZIP **Bethel OH 45106**

TREAS. **Lois M. Logan**
STREET **2795 Williamsburg Bantam Road**
CITY/STATE/ZIP **Bethel OH 45106**

SEC'Y. **Lois M. Logan**
STREET **2795 Williamsburg Bantam Road**
CITY/STATE/ZIP **Bethel OH 45106**

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND OFFICERS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

To be signed by president or other officer.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: **Lois M. Logan**

Please print name and title of signer: **Lois M. Logan**

NAME

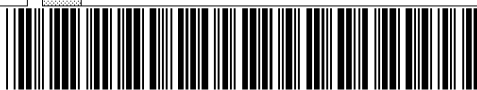
/

TREASURER

TITLE

FEE DUE: \$25.00

E-MAIL ADDRESS (OPTIONAL):



7115420100258

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529