State of New Hampshire
2010 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2010

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 01/07/2010
Business ID: 560614
William M. Gardner
Secretary of State

HEMLOCK HILLS, LLC

PO BOX 985
ACTON, MA 01720

ENTITY TYPE: LLC
BUSINESS ID: 560614
STATE OF DOMICILE: MASSACHUSETTS

INVEST, OWN, DEVELOP REAL ESTAE

1

ADDRESS OF PRINCIPAL OFFICE:
25 WESTFORD LANE
ACTON, MA 01720

REGISTERED AGENT AND OFFICE:
MACMARTIN, J ALEXANDER, JR ESQ
GAUTHIER & MACMARTIN, PLLC, 321 NASHUA ST
MILFORD, NH 03055

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

☐ The new mailing address

☐ The new principal office address

PO Box is acceptable.

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MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT **A**

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

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS **B**

MEMB. James Fenton
STREET 3 Milberry Lane
CITY/STATE/ZIP Acton Ma 01720
MEMB. Michael Jeanson
STREET 12 Kennedy Lane
CITY/STATE/ZIP Acton Ma 01720
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

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To be signed by the manager, if no manager, must be signed by a member.
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: James Fenton

Please print name and title of signer: James Fenton / MEMBER
NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

056061420101006

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