State of New Hampshire
2010 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2010

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

Filed

Date Filed: 01/20/2010

Business ID: 23587

William M. Gardner

Secretary of State

YANKEE PUBLISHING INCORPORATED

P.O. BOX 520

DUBLIN, NH 03444

ENTITY TYPE: CORPORATION

BUSINESS ID: 23587

STATE OF DOMICILE: NEW HAMPSHIRE

MAGAZINE PUBLISHING (1997 AR)

1

ADDRESS OF PRINCIPAL OFFICE:

1121 MAIN ST

DUBLIN, NH 03444

REGISTERED AGENT AND OFFICE:

TROWBRIDGE, JAMES

MAIN ST , PO BOX 520

DUBLIN, NH 03444

2

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.

3

OFFICERS

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

(MUST LIST AT LEAST ONE OFFICER BELOW)

A

PRES. **James Trowbridge**
STREET **1121 Main Street**
CITY/STATE/ZIP **Dublin Nh 03444**

TREAS. **Linda Anne Snow**
STREET **1121 Main Street**
CITY/STATE/ZIP **Dublin Nh 03444**

V-PRES. **E. Sherin Pierce**
STREET **1121 Main Street**
CITY/STATE/ZIP **Dublin Nh 03444**

V-PRES. **Jody S Bugbee**
STREET **1121 Main Street**
CITY/STATE/ZIP **Dublin Nh 03444**

BOARD OF DIRECTORS

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

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

B

DIR. **Judson D. Hale Sr**
STREET **520 Main Street**
CITY/STATE/ZIP **Dublin Nh 03444**

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

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

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

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

4

To be signed by an officer, director, or any other person authorized by the board of directors.
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: **Linda Anne Snow**

Please print name and title of signer: **Linda Anne Snow** / **TREASURER**

NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

2358720101009

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

2010 ANNUAL REPORT

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS:

VICE PRESIDENT

BROOK HOLMBERG
1121 MAIN STREET
DUBLIN, NH 03444

VICE PRESIDENT

PAUL BELLIVEAU
1121 MAIN STREET
DUBLIN, NH 03444