State of New Hampshire
2013 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, 2013

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

Filed
Date Filed: 03/27/2013
Business ID: 362447
William M. Gardner
Secretary of State

AUGUSTA/BRISTOL PIZZA, LLC

82 RUNNING HILL ROAD
SOUTH PORTLAND, ME 04106

ENTITY TYPE: LLC
BUSINESS ID: 362447
STATE OF DOMICILE: MAINE

ACQUIRE, OWN, OPERATE PIZZA HUT RESTAURANTS

1

ADDRESS OF PRINCIPAL OFFICE:
82 RUNNING HILL ROAD
SOUTH PORTLAND, ME 04106

REGISTERED AGENT AND OFFICE:
C T CORPORATION SYSTEM
9 CAPITOL STREET
CONCORD, NH 03301

2

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

[X] The new mailing address **82 Running Hill Road, Suite 400, South Portland, ME 04106**

[X] The new principal office address **82 Running Hill Road, Suite 400, South Portland, ME 04106**

PO Box is acceptable.

3

MANAGERS — **A**

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

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

MEMBERS — **B**

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

MEMB. Dead River Company
STREET 82 Running Hill Road, Suite 400
CITY/STATE/ZIP South Portland ME 04106
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

4

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: **Christopher S. Hersey**

Please print name and title of signer: **Christopher S. Hersey** / **AUTHORIZED PARTY**
NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

036244720131003

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, 107 N. Main St., Room 204, Concord, NH 03301