State of New Hampshire
2014 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, 2014
ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 04/02/2014
Business ID: 488383
William M. Gardner
Secretary of State

DUBE AUTO GROUP, INC.

271 MAIN STREET
WILMINGTON, MA 01887

ENTITY TYPE: CORPORATION
BUSINESS ID: 488383
STATE OF DOMICILE: NEW HAMPSHIRE

RETAIL AUTO SALES

1

ADDRESS OF PRINCIPAL OFFICE:
40 DOVER POINT RD.
DOVER, NH 03820

REGISTERED AGENT AND OFFICE:
SWANSON, DALE T, ESQ
53 MAIN STREET
NEWMARKET, NH 03857

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 — **A**

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. **Christopher Scott Dube**
STREET **271 Main Street**
CITY/STATE/ZIP **Wilmington Ma 01887**
V-PRES. **William R Dube**
STREET **252 Dover Point Rd**
CITY/STATE/ZIP **Dover Nh 03820**
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

BOARD OF DIRECTORS — **B**

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. **William R Dube**
STREET **252 Dover Point Rd**
CITY/STATE/ZIP **Dover Nh 03820**
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: **Christopher Scott Dube**

Please print name and title of signer: **Christopher Scott Dube** / **PRESIDENT**
NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

048838320141002

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