



State of New Hampshire 2015 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, 2015

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

Filed
Date Filed: 01/05/2015
Business ID: 10955
William M. Gardner
Secretary of State

HYDREN REALTY, INC.

PO BOX 983

INTERVALE, NH 03845

ADDRESS OF PRINCIPAL OFFICE:

54 DUNDEE ROAD

INTERVALE, NH 03845

REGISTERED AGENT AND OFFICE:

MELENDY, FAY E, ESQ

481 WHITE MOUNTAIN HIGHWAY

CONWAY, NH 03818

ENTITY TYPE: CORPORATION

BUSINESS ID: 10955

STATE OF DOMICILE: NEW HAMPSHIRE

REALTY

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.

OFFICERS

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

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Carl G. Hydren

STREET PO Box 983

CITY/STATE/ZIP Intervale Nh 03845

SEC'Y. Betty Sue Hydren

STREET PO Box 983

CITY/STATE/ZIP Intervale Nh 03845

TREAS. Betty Sue Hydren

STREET PO Box 983

CITY/STATE/ZIP Intervale Nh 03845

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

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

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Bradford Paul

STREET 18 Nod Road

CITY/STATE/ZIP Groton Ma 01450

DIR. Elizabeth Townsend Paul

STREET 18 Nob Road

CITY/STATE/ZIP Groton Ma 01450

DIR. Raye Ann Sylvester

STREET 20 Gardner Road

CITY/STATE/ZIP Reading MA 01867

NAME

STREET

CITY/STATE/ZIP

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: Betty Sue Hydren

Please print name and title of signer: Betty Sue Hydren

NAME

/ TREASURER

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



1095520151009

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