State of New Hampshire
2015 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, 2015

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

Filed

Date Filed: 02/02/2015

Business ID: 632668

William M. Gardner

Secretary of State

CONNECTED HOME AND BUSINESS, LLC

PO BOX 10127

BEDFORD, NH 03110

ENTITY TYPE: LLC

BUSINESS ID: 632668

STATE OF DOMICILE: NEW HAMPSHIRE

INSTALLATION, SALES, SERVICE, CONSTRUCTION RELATING TO HOME THEATER, AUDIO-VIDEO, SECURITY, AUTOMATION, COMPUTERS AND HOME INSPECTION, REMODELING PROPERTY

1

ADDRESS OF PRINCIPAL OFFICE:

PO BOX 10127

BEDFORD, NH 03110

REGISTERED AGENT AND OFFICE:

MULLEN, DONNA R

31 OLDE ENGLISH ROAD

BEDFORD, NH 03110

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

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. David Jay Cabral
STREET 31 Olde English Road
CITY/STATE/ZIP Bedford Nh 03110

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: Dave Cabral

Please print name and title of signer: Dave Cabral / AUTHORIZED PARTY

NAME TITLE

FEE DUE: **$100.00**

E-MAIL ADDRESS (OPTIONAL):

063266820151000

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