State of New Hampshire
2005 NON PROFIT REPORT

REPORT DUE BY December 31, 2005

Filed
Date Filed: 12/24/2005
Business ID: 431859
William M. Gardner
Secretary of State

COUCHSURFING INTERNATIONAL INC.

200 EAST SIDE RD. , PO BOX 288
CONWAY , NH 03818

ENTITY TYPE:	NONPROFIT
BUSINESS ID:	431859
STATE OF DOMICILE:	NEW HAMPSHIRE
FEDERAL ID:	20-0732506

CHARITABLE, RELIGIOUS, EDUCATIONAL AND SCIENTIFIC PURPOSES

1

ADDRESS OF PRINCIPAL OFFICE:
200 EAST SIDE RD. , PO BOX 288
CONWAY , NH 03818

REGISTERED AGENT AND OFFICE: (foreign only)

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 OFFICERS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES.	CASEY FENTON
STREET	PO BOX 288
CITY/STATE/ZIP	CONWAY NH 03818
TREAS.	CASEY FENTON
STREET	PO BOX 288
CITY/STATE/ZIP	CONWAY NH 03818
SEC'Y.	CASEY FENTON
STREET	PO BOX 288
CITY/STATE/ZIP	CONWAY NH 03818
NAME	
STREET	
CITY/STATE/ZIP	

BOARD OF DIRECTORS — **B**

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

DIR.	CASEY FENTON
STREET	PO BOX 288
CITY/STATE/ZIP	CONWAY NH 03818
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 president or other officer.
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: CASEY FENTON

Please print name and title of signer: CASEY FENTON / PRESIDENT
NAME TITLE

FEE DUE: **$25.00**

E-MAIL ADDRESS (OPTIONAL):

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