State of New Hampshire
2006 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, 2006

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

Filed
Date Filed: 02/10/2006
Business ID: 11763
William M. Gardner
Secretary of State

MARIMARC CORPORATION

DARBY FIELD INN , 185 CHASE HILL RD
ALBANY , NH 03818

ENTITY TYPE:	CORPORATION
BUSINESS ID:	11763
STATE OF DOMICILE:	NEW HAMPSHIRE
FEDERAL ID:	020346045

INNS LODGING

1

ADDRESS OF PRINCIPAL OFFICE:
DARBY FIELD INN , 185 CHASE HILL RD
ALBANY , NH 03818

REGISTERED AGENT AND OFFICE:
RANDALL F COOPER ESQ
2935 WHITE MOUNTAIN HWY
NORTH CONWAY , NH 03860

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

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

A

PRES.	**H. Marc Donaldson**
STREET	**185 Chase Hill Road**
CITY/STATE/ZIP	**Albany Nh 03818**
SEC'Y.	**Randall F. Cooper**
STREET	**2935 White Mountain Highway**
CITY/STATE/ZIP	**North Conway Nh 03860**
TREAS.	**Maria Donaldson**
STREET	**185 Chase Hill Road**
CITY/STATE/ZIP	**Albany Nh 03818**
NAME	
STREET	
CITY/STATE/ZIP	

BOARD OF DIRECTORS

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

B

DIR.	**H. Marc Donaldson**
STREET	**185 Chase Hill Road**
CITY/STATE/ZIP	**Albany Nh 03818**
DIR.	**Maria Donaldson**
STREET	**185 Chase Hill Road**
CITY/STATE/ZIP	**Albany Nh 03818**
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: **H. MARC DONALDSON**

Please print name and title of signer: **H. MARC DONALDSON** / **PRESIDENT**

NAME TITLE

FEE DUE: **$100.00**

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