State of New Hampshire
2004 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, 2004

ANNUAL REPORTS RECEIVED AFTER APRIL 15, 2004, WILL BE ASSESSED A $50.00 LATE FEE.

Filed
Effective Date: 03/03/2004
Business ID: 133500
William M. Gardner
Secretary of State
200406390044

KEENEY SOFTWARE, INC.

24 TUCKAWAY SHORES RD
NOTTINGHAM, NH 03290

ENTITY TYPE:	CORPORATION
BUSINESS ID:	133500
STATE OF DOMICILE:	NEW HAMPSHIRE
FEDERAL ID:	020423307

DEVELOP SOFTWARE AND RELATED COMPUTER SERVICE

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ADDRESS OF PRINCIPAL OFFICE:
24 TUCKAWAY SHORES RD
NOTTINGHAM, NH 03290

REGISTERED AGENT AND OFFICE:
WILLIAM G SCOTT
82 COURT ST, PO BOX 418
PORTSMOUTH, NH 03801

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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.

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OFFICERS

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

A

PRES	DAVID KEENEY
STREET	24 TUCKAWAY SHORES RD.
CITY/STATE/ZIP	NOTTINGHAM, NH 03290
TREAS	JOANNE KEENEY
STREET	24 TUCKAWAY SHORES RD
CITY/STATE/ZIP	NOTTINGHAM, NH 03290
NAME	
STREET	
CITY/STATE/ZIP	
NAME	
STREET	
CITY/STATE/ZIP	

BOARD OF DIRECTORS

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

B

NAME	DAVID KEENEY
STREET	24 TUCKAWAY SHORES RD.
CITY/STATE/ZIP	NOTTINGHAM, NH 03290
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

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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: DAVID KEENEY

Please print name and title of signer: DAVID KEENEY / PRESIDENT

NAME TITLE

REPORT FEE IS: **$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