

2025 – ANNUAL REPORT INSTRUCTION FORM

(MAINE BUSINESSES)

IMPORTANT! FOLLOW INSTRUCTIONS EXACTLY WHEN COMPLETING THIS FORM. PLEASE PRINT.			
Customer ID Number F494461660	Notice Date 11/08/2024	Charter Number	Entity Start Date 04/30/2008
Business Address			
PMB1105A AUTO ALL FOR AADC 044 7000024043 00.0096.0039 24043/1 			
BANGOR ME 04402-1210		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Please Respond By: 12/08/2024 </div>	

Maine laws require every limited liability company authorized to transact business in the state to timely file an annual report every year. If EATON PEABODY PATENT GROUP, LLC does not file an annual report, you may be at risk for penalties and fines.

MAINE REVISED STATUTES ANNOTATED 31 § 1665: “Each year, each limited liability company authorized to conduct business in this state shall deliver to the office of the Secretary of State for filing an annual report...”

If the business entity is still in use, C.F.S., a private entity, will assist for a fee in the filing of your annual report.

C.F.S. IS NOT A GOVERNMENT AGENCY AND DOES NOT HAVE A CONTRACT WITH ANY GOVERNMENTAL AGENCY TO PROVIDE THIS SERVICE.

To utilize this service, follow the steps below. All orders will be fulfilled from our office in Naples, Florida. C.F.S. will not disclose any information about your business to any third-party, including competitors, unless required by law. Mail the completed form with **\$210.00** in the enclosed envelope. **Please respond today!**

STEP 1. Verify the accuracy of the pre-printed business information. Make any necessary changes and complete any missing information.			
Type of Business LLC	DCN Number	Formation Date 04/30/2008	Filing Year 2025
Registered Agent Name			
Registered Agent Main Business Address EATON PEABODY, 80 EXCHANGE STREET, BANGOR, ME 04401			
Registered Agent Physical Address			

STEP 2. Provide a brief statement of the character of the business in which the limited liability company is actually engaged in the State of Maine; if none, so indicate:

STEP 3. Provide the name and address of at least one person who is a member, manager or other authorized person of the limited liability company.	
Name	Title
Address (no P.O. Box)	
Name	Title
Address (no P.O. Box)	
Name	Title
Address (no P.O. Box)	

STEP 4. PAYMENT INFORMATION Complete payment to file your annual report.		
<input type="checkbox"/> CHECK ENCLOSED FOR \$210.00 <i>Price includes state fee and C.F.S. processing fee.</i>	Please make your check payable to: C.F.S. 126 Western Ave #331 Augusta, ME 04330	Further assistance: Call (207) 466-8481 annualreportfilings@gmail.com
<i>ALL C.F.S. PROCESSING FEES ARE 100% FULLY GUARANTEED.</i>		

STEP 5. I authorize an electronic signature on behalf of the above-mentioned LLC. I understand that C.F.S. is not a government agency and is not providing legal advice.		
Signature **REQUIRED** (to be signed by an officer or registered agent)		Print Name Clearly
Title	Email Address	Phone

THE STATE OF MAINE ANNUAL REPORT CAN BE FILED DIRECTLY THROUGH THE STATE FOR THE STATUTORY \$85 FEE.