

**INSTRUCTIONS FOR COMPLETING
ANNUAL REPORT FORM FOR
CORPORATIONS**

Revised 11/23/10

Name of the Corporation: Name as it appears on record. **Please note: the name may not be altered on the report.** Name changes may only be effectuated by filing a Certificate of Amendment or an Application for Amended Certificate of Authority.

Business ID: Unique indexing number assigned by the Secretary of the State that identifies the corporation. (This is not a tax ID #).

Due Date: Reports should be submitted by the date appearing on the report form. Corporations that fail to comply will be in statutory default.

General Corporate Information: Type of corporation- domestic (formed in Connecticut) or foreign (formed outside of Connecticut). The filing fee is noted on the report form.

Mailing Address:

- Address to which correspondence is sent.
- Any changes to the address must be entered in the space provided. (P.O. Boxes are acceptable).

Principal Office Address:

<u>Domestic Corporations</u>	<u>Foreign Corporations</u>
<ul style="list-style-type: none">• Address of principal office should appear on the report form.• Any changes to the address must be entered in the space provided.• Address must include street, town or city, state and postal code.• P.O. Box is unacceptable.	<ul style="list-style-type: none">• Address of principal office in Connecticut, if any.• Any changes to the address must be entered in the space provided.• Address must include street, town or city, state and postal code.• P.O. Box is unacceptable.

Executive Office Address: To be completed by foreign corporations only

- Executive office address should appear on the report form.
- Any changes to the address must be entered in the space provided.
- Address must include street, town or city, state and postal code. **P.O. Box is unacceptable.**

Principal Office Address in state of formation: To be completed by foreign corporations only

- Principal office address in state of incorporation should appear on the report form.
- Any changes to the address must be entered in the space provided.
- Address must include street, town or city, state and postal code.
- **P.O. Box is unacceptable.**

Officer/Director information:

- All officer(s)/director(s) are required to be reported.
- Review and update officer/director information on the attached page being sure to include full name(s), title(s), residence and business addresses that must include street, town or city, state and postal code. **P.O. Box is unacceptable.**
- When an officer/director lacks a business address, the word "none" should be specified.
- Attach and reference additional 8 ½ x 11 sheets if more space is required.

Name and Capacity/Title of Signatory:

- Both the name and title of the signatory must be printed or typed.
- Person signing must be listed within the report form as an officer/director. Printed name and title must exactly match the full name & title as they are listed within the report form.
- Signature: Person named as signatory must sign the report.
- Date the report is signed.

Please provide email address (optional).

Please make check payable to the Secretary of the State

Secretary of the State's Federal Employee Identification Number 06-6000798

FILE ON-LINE @ www.concord.sots.ct.gov

(860) 509-6003

FOR LLC's, LLP's, and LP's SEE REVERSE →