

Filing Fee \$5.00

**DOMESTIC NONPROFIT  
CORPORATION**

**STATE OF MAINE**

**CHANGE OF CONTACT PERSON  
and/or  
ADDRESS**

\_\_\_\_\_  
Deputy Secretary of State

**A True Copy When Attested By Signature**

\_\_\_\_\_  
Deputy Secretary of State

\_\_\_\_\_  
(Name of Corporation)

Pursuant to [13 MRSA §910](#) the undersigned corporation executes and delivers for filing the following Change of Contact Person and/or Address:

**FIRST:** ("X" all boxes that apply)

**A.** ☐ change of address

**B.** ☐ change of contact person and address

**C.** ☐ change of contact person

**D.** ☐ change in name of current contact person

**SECOND:** The name and address of the contact person appearing on the record in the Secretary of State's office:

\_\_\_\_\_  
(name of current contact person)

\_\_\_\_\_  
(street, city, state and zip code)

**THIRD:** Complete this Item as follows based on your selection in Item First:

- A.** The new address (provide address information only);
- B.** The name and address of the **new** contact person (provide name and address information);
- C.** The name of the **new** contact person (provide name only); **OR**
- D.** The new name of the current contact person (provide name only).

\_\_\_\_\_  
(name of new contact person or new name of current contact person)

\_\_\_\_\_  
(physical location, not P.O. Box – street, city, state and zip code)

\_\_\_\_\_  
(mailing address if different from above)

**DATED** \_\_\_\_\_

**\*By** \_\_\_\_\_  
(original written signature)

\_\_\_\_\_  
(type or print name)

\_\_\_\_\_  
(title of signer)

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\*This change **MUST** be signed as follows:

- (1) if Item First, A or D was selected, then by the contact person **OR**
- (2) if Item First, B or C was selected, then by the secretary or clerk

Please remit your payment made payable to the Maine Secretary of State.

Submit completed form to:

**Secretary of State**  
**Division of Corporations, UCC and Commissions**  
**101 State House Station**  
**Augusta, ME 04333-0101**  
Telephone Inquiries: (207) 624-7752

Email Inquiries: [CEC.Corporations@Maine.gov](mailto:CEC.Corporations@Maine.gov)

## Customer Contact Cover Letter

Name of entity(s) on the submitted filings:

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**Optional special handling request(s):** (check only if applicable)

- ☐ Hold attested copy for pick up (will be required to pick up at our office in Augusta, Maine)
- ☐ 24-hour expedited filing (next business day) service: **\$50** additional filing fee per entity
- ☐ Immediate expedited filing (same business day): **\$100** additional filing fee per entity

**NOTE:** Only one expedite fee is required if filing multiple documents for the same entity/charter number at the same time.

**Payment can be made by check or money order** (payable to Maine Secretary of State) or by credit card. You may obtain a credit card voucher at <https://www.maine.gov/sos/cec/forms/credit.pdf>.

Total fee(s) enclosed: \$ \_\_\_\_\_

\_\_\_\_\_  
(Name of contact person)

\_\_\_\_\_  
(Daytime telephone number)

\_\_\_\_\_  
(Contact email address for this filing)

\_\_\_\_\_  
(Email address to use for annual report reminders)

Name and address of person **to return the attested copy** of the completed filing:

\_\_\_\_\_  
(Name of attested copy recipient)

\_\_\_\_\_  
(Firm or Company)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State & Zip)

**NOTE:** Failure to provide a contact name and telephone number or email address will result in any erroneous filing(s) being returned to the filer by the Secretary of State's office.

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or [cec.corporations@maine.gov](mailto:cec.corporations@maine.gov)

**Submit filings to:**

**Mailing Address if using US Postal Service**

Department of the Secretary of State  
Corporations, UCC and Commissions  
101 State House Station  
Augusta, ME 04333-0101

**Mailing Address if using FedEx/UPS**

Department of the Secretary of State  
Corporations, UCC and Commissions  
6 E. Chestnut Street, 5th Floor  
Augusta, ME 04330