

A. Ralph Mollis, Secretary of State Corporations Division . 148 W. River Street Providence, RI 02904-2615 401.222.3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010 Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

. Corporate ID No. 000084708	2. Name of Corp Cabot Hous						
. Street Address Principal Bi 10 Industrial Way	ısiness Office		City Amesbury	State MA	<sup>Zip</sup> 01913		
1. Business Phone No. 978-834-9280		5. State of Incorporation New Hampshire	New Hampshire				
	nds of furniture, furni	ishings, hardware, bric-a-br	ac, fittings,fixtures,appliances,a				
. NAMES AND ADDR resident Name Robert Bendetson	ESSES OF THE OFFI	CERS: ("X" BOX FOR ATT	TACHMENT)  TILL IN SPACES BEFORE USING ATTACHMENTS  Vice President Name  Margery J. Bendetson				
reel Address 10 Industrial Way			Street Address 10 Industrial Way				
Amesbury	State MA	<sup>Zip</sup> 01913	City Amesbury	State MA	<sup>Zip</sup> 01913		
ecretary Name Suzanne Maker	er		Treasurer Name Robert Bendetson				
ireet Address 10 Industrial Way			Street Address 10 Industrial Way				
City Amesbury	State MA	<sup>Ζιρ</sup> 01913	City Amesbury	State MA	<sup>Zip</sup> 01913		
s. NAMES AND ADDE Director Name Robert Bedetson	RESSES OF THE DIRI	ECTORS: ("X" BOX FOR A	TTACHMENT) THE FILL IN SPA Director Name Peter Bendetson	CES BEFORE USIN	G ATTACHMENTS		
Street Address 10 Industrial Way			Street Address 10 Industrial Way				
ापु Amesbury	State MA	<i>Ζi</i> φ <b>01913</b>	City Amesbury	State MA	<i>Ζψ</i> 01913		
Director Name Margery J. Bendets	son		Director Name				
Street Address 10 Industrial Way			Street Address				
City Amesbury 9. SHARES AUTHORI	State MA	<sup>Zip</sup> 01913	City  10. SHARES ISSUED ("X"	State  BOX FOR ATTAC	Zip HMENT)		
, shares authori			ISSUED SHARES — THIS SECTION	MUST BE COMPLETED	)		
State. Changes requi	urrently of record in t re an additional filing	the Office of the Secretary og. See Section 9 of	f Number of Shares 6 class A & 49 class B	IS SECTION MUST BE COMPLETED  Class/Series Par Value			
instruction sheet.			945 class C	nonvoting	None		

	FILED	Under penalty of perjury, I declare and affirm that I have examined this reincluding any accompanying schedules and statements, and that all statem	eport.
File Da	2010 APR 23 AM 10: 51 MA ES A94 0105	contained herein are true and correct.  /- 2 2 -/C  Signature  Date  Robert Bendetson	
By:	FOR SECRETARY OF STATE USE ONLY  OF STATE USE ONLY	Print or Type Name President  Title Form 630 Rev. 08/08	8