



**TOBACCO PRODUCT MANUFACTURER  
STATEMENT OF REGISTERED AGENT**

MAINE OFFICE OF THE ATTORNEY GENERAL

Please Email to [Elizabeth.Reardon@Maine.gov](mailto:Elizabeth.Reardon@Maine.gov) and [Fatima.Lima@Maine.gov](mailto:Fatima.Lima@Maine.gov)

CERTIFICATION YEAR

**2026**

**\*Due On or Before April 30, 2026**

<b>MANUFACTURER INFORMATION:</b>	
Business Name:	Contact Person:
Address:	City:
State:	Zip Code:
Telephone:	Email:

<b>MANUFACTURER'S REGISTERED AGENT FOR SERVICE OF PROCESS:</b>	
Company:	Address:
City:	State:
Zip Code:	Telephone:
Fax:	Email:

<b>REQUIRED DOCUMENTATION:</b>
Statement from the Registered Agent noting his or her service in this capacity. Pursuant to Maine law, this Registered Agent must reside in the State of Maine.

<b>EMAIL THE COMPLETED FORM TO:</b>	
<a href="mailto:Elizabeth.Reardon@Maine.gov">Elizabeth.Reardon@Maine.gov</a> and <a href="mailto:Fatima.Lima@Maine.gov">Fatima.Lima@Maine.gov</a>	<p>→ This form, including attachments, must be received on or before <b>April 30, 2026</b>.</p> <p>→ This form will be returned and left unprocessed unless all fields are completed and all required attachments have been received.</p>