

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90301 002 ***150.00

05/19/02 AT

DOCUMENT # F00000006516

1. Entity Name
NEW BALANCE ATHLETIC SHOE, INC.

Principal Place of Business 20 GUEST ST. BOSTON MA 02135-2088	Mailing Address 20 GUEST ST. BOSTON MA 02135-2088
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 04-2460172	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

Name		
Street Address (P.O. Box Number is Not Acceptable)		
City	FL	Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
V <input type="checkbox"/> Delete	WITHEE, JOHN 61 N. BEACON STREET BOSTON MA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
C <input type="checkbox"/> Delete	DAVIS, JAMES S 61 N. BEACON STREET BOSTON MA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VT <input type="checkbox"/> Delete	GARDNER, JOHN E 61 N. BEACON STREET BOSTON MA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
S <input type="checkbox"/> Delete	GAURON, PAUL R 61 N. BEACON STREET BOSTON MA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
P <input type="checkbox"/> Delete	TOMPKINS, JAMES 61 N. BEACON STREET BOSTON MA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
V <input type="checkbox"/> Delete	LARSEN, JOHN E 61 N. BEACON STREET BOSTON MA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: John K. Withee DATE: 4/29/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)