

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90322 017 ***158.75

DOCUMENT # F94000006080

1. Entity Name
TOMMARK, INC.

Principal Place of Business P.O. BOX 557 SUTTON MA 01590	Mailing Address P.O. BOX 557 SUTTON MA 01590
--	--

2. Principal Place of Business 49 Church Street Suite, Apt. #, etc.	3. Mailing Address 49 Church Street Suite, Apt. #, etc.
---	---

City & State Whitinsville, MA	City & State Whitinsville, MA	4. FEI Number 04-3130311	Applied For Not Applicable
Zip 01588	Country Worcester	Zip 01588	Country Worcester



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
HAWKINS, PHILLIP
SUITE 200A-B6
1881 N.E. 26 STREET
FORT LAUDERDALE FL 33305

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORIARTY, MARK L 33 JESSE ELDREDGE ROAD P.O. BOX 842 SOUTH HARWICH MA 02661 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Thomas F. Smith Jr. 370 Dillon Lane Swansea, MA 02777 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD SMITH, THOMAS F JR 370 DILLON LANE SWANSEA MA 02777 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO, Director Phillip D. Brown 271 Carpenter Road Whitinsville, MA 02777 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Kevin R. Day 17 Monza Road Nashua, NH 03060 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Clerk, Director Robert B. Clarke, Jr. 56 Gilboa Street Douglas, MA 01516 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	director Michael J. Kroll 22 Oak Street Uxbridge, MA 01569 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	director David H. Perry 22 Johnson Road Sutton, MA 01590 <input type="checkbox"/> Change <input checked="" 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: _____ **President** **February 20, 2001** **(508) 234-1550**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

721084

ATTACHMENT

2001 UNIFORM BUSINESS REPORT (URB)

Document #F340000006080

Tommark, Inc.

12. DIRECTOR Kenneth J. Redding
 P.O. Box 604
 Uxbridge, MA 01569