

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 26, 2002 8:00 am**  
**Secretary of State**

08-26-2002 90069 019 \*\*\*158.75

**DOCUMENT # F94000006080**

1. Entity Name  
**TOMMARK, INC.**

Principal Place of Business  
**49 CHURCH ST**  
**WHITINSVILLE MA 01588**

Mailing Address  
**49 CHURCH ST**  
**WHITINSVILLE MA 01588**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **04-3130311**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAWKINS, PHILLIP**  
**SUITE 200A-B6**  
**1881 N.E. 26 STREET**  
**FORT LAUDERDALE FL 33305**

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. I am familiar with, and accept the obligations of registered agent.

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. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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	<b>P</b> <b>SMITH, THOMAS F JR</b> <b>370 DILLON LN</b> <b>SWANSEA MA 02777</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEOD</b> <b>BROWN, PHILLIP D</b> <b>271 CARPENTER RD</b> <b>WHITINSVILLE MA 02777</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>DAY, KEVIN R</b> <b>17-MONZA RD</b> <b>NASHUA NH 03060</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD</b> <b>CLARKE, ROBERT B JR</b> <b>56 GILBOA ST</b> <b>DOUGLAS MA 01516</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>KROLL, MICHAEL J</b> <b>22 OAK ST</b> <b>UXBRIDGE MA 01569</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PERRY, DAVID H</b> <b>22 JOHNSON RD</b> <b>SUTTON MA 01590</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>director</b> <b>Kenneth J. Redding</b> <b>P.O. Box 604</b> <b>Uxbridge, MA 01569</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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 empowers.

SIGNATURE: **SIGNATURE REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **8/14/02** Daytime Phone # **508 234-1550**

CR2E034 (4/02)

Attachment  
F94000006080  
**Sterling Associates**

Tel: (508) 234-1550 (800) 286-8073 Fax (508) 234-1557  
Web: [www.BoatBanker.net](http://www.BoatBanker.net)

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49 Church Street ~ Whitinsville, MA 01588

Date: August 16, 2002

Division of Corporations, Florida  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

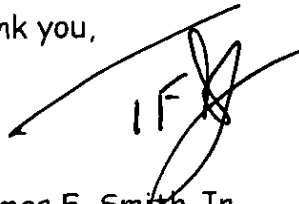
To whom it may concern:

We received the request 2002 Uniform Business Report. The fee requested has a late charge of \$400.00, however, we never received a request prior to this request.

We have enclosed our check for \$150.00 (plus 8.75 for Certificate of Status).

Should you have any questions please give us a call.

Thank you,

A handwritten signature in black ink, appearing to read 'TF Smith', with a large, sweeping flourish extending from the end of the signature.

Thomas F. Smith Jr.  
President