

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000000745 (7)**

1. Corporation Name

THINKING MACHINES CORPORATION

Principal Place of Business

**14 CROSBY DRIVE
BEDFORD MA 01730**

Mailing Address

**14 CROSBY DRIVE
BEDFORD MA 01730**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/13/1996

2. Principal Place of Business

21 16 NEW ENGLAND EXECUTIVE PARK

Suite, Apt. #, etc.

2a. Mailing Address

26 16 NEW ENGLAND EXECUTIVE PARK

Suite, Apt. #, etc.

4. FEI Number

04-3294782

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person authorized to sign this statement

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **DORETTI, ROBERT L**

STREET ADDRESS **14 CROSBY DR
BEDFORD MA**

CITY-ST-ZIP **ST**

NAME **LABOSSIERE, ROBERT J**

STREET ADDRESS **14 CROSBY DR.
BEDFORD MA**

CITY-ST-ZIP **AS**

NAME **CANNON, STACEY**

STREET ADDRESS **14 CROSBY DRIVE
BEDFORD MA**

CITY-ST-ZIP **D**

NAME **STEWART, CHARLES**

STREET ADDRESS **14 CROSBY DR
BEDFORD MA**

CITY-ST-ZIP **D**

NAME **LEVIN, GEORGE**

STREET ADDRESS **14 CROSBY DR
BEDFORD MA**

CITY-ST-ZIP **D**

NAME **GEVORTZ, BRADLEY**

STREET ADDRESS **14 CROSBY DR
BEDFORD MA**

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS **16 NEW ENGLAND EXECUTIVE PARK**

1.4 CITY-ST-ZIP **BURLINGTON, MA 01803**

2.1 TITLE **CHIEF FINANCIAL OFFICER** ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS **JACK WARNOCK
16 NEW ENGLAND EXECUTIVE PARK**

2.4 CITY-ST-ZIP **BURLINGTON, MA 01803**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS **600002465936**

3.4 CITY-ST-ZIP **-03/24/98--01020--019**

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS **16 NEW ENGLAND EXECUTIVE PARK**

4.4 CITY-ST-ZIP **BURLINGTON, MA 01803**

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS **16 NEW ENGLAND EXECUTIVE PARK**

5.4 CITY-ST-ZIP **BURLINGTON, MA 01803**

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS **16 NEW ENGLAND EXECUTIVE PARK**

6.4 CITY-ST-ZIP **BURLINGTON, MA 01803**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.