


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90406 023 ****70.00

DOCUMENT # N01000002610 1. Entity Name NORTHEAST HTE USER'S GROUP, INC.					
Principal Place of Business 50 SOUTH MAIN STREET WEST HARFORD, CT 06107			Mailing Address 50 SOUTH MAIN STREET WEST HARFORD, CT 06107		
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 06-1627608	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEMS 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DIGIUSEPPE, CHERYL		NAME		
STREET ADDRESS	CITY OF PAWTUCKET 137, ROOSEVELT AVE		STREET ADDRESS		
CITY-ST-ZIP	PAWTUCKET, RI 02860		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MARKEE, KEVIN		NAME	Dennis Hunt	
STREET ADDRESS	CITY OF PORTLAND 389 CONGRESS ST		STREET ADDRESS	P.O. Box 1508	
CITY-ST-ZIP	PORTLAND, ME 04101		CITY-ST-ZIP	Vineland, NJ 08362	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	JOHNSON, CHRIS		NAME	Cameron Lewis	
STREET ADDRESS	50 SOUTH MAIN ST		STREET ADDRESS	5 Governor Winthrop Blvd.	
CITY-ST-ZIP	WEST HARTFORD, CT 06107		CITY-ST-ZIP	New London, CT 06320	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PONESS, EVELYN		NAME		
STREET ADDRESS	TOWN OF NEEDHAM 1472 HIGHLAND AVE		STREET ADDRESS		
CITY-ST-ZIP	NEEDHAM, MA 02492		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EDMUNDSON, KATHY		NAME		
STREET ADDRESS	25 SOUTH MANOR AVENUE		STREET ADDRESS		
CITY-ST-ZIP	KINGSTON, NY 12401		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HEARTY, SEAN		NAME		
STREET ADDRESS	CITY OF DANBURY, 155 DEER HILL AVE		STREET ADDRESS		
CITY-ST-ZIP	DANBURY, CT 06810		CITY-ST-ZIP		
12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Kevin Markee</u> KEVIN MARKEE			4-27-05 (207) 874-8853		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		