## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## FILED Mar 19, 2007 8:00 am **Secretary of State**

03-19-2007 90083 043 \*\*\*\*61.25

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NORTHEAST HTE USER'S GROUP, INC. 40038532 Principal Place of Business Mailing Address **50 SOUTH MAIN STREET 50 SOUTH MAIN STREET** WEST HARFORD, CT 06107 WEST HARFORD, CT 06107 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 06-1627608 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEMS Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to **\$5.00** May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS Addition TITLE ☐ Delete TITLE NAME DIGIUSEPPE, CHERYL NAME CITY OF PAWTUCKET 137, ROOSEVELT AVE STREET ADDRESS STREET ADORESS PAWTUCKET, RI 02860 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition DIBVONO, DOROTHY NAME NAME STREET ADDRESS 1 HEINEMAN PL STREET ADDRESS CITY-ST-ZIP HARRISON, NY 10528 CITY-ST-ZIP Delete Addition TITLE TITLE Steve Montemorro 142 E. Main St. NAME HUNT, DENNIS STREET ADDRESS P.O. BOX 1508 STREET ADDRESS Meriden, CT 06450 CITY-ST-ZIP VINELAND, NJ 08362 CITY-ST-ZIP TITLE ☐ Detete TITLE Addition NAME PONESS, EVELYN NAME TOWN OF NEEDHAM 1472 HIGHLAND AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEEDHAM, MA 02492 CiTY-ST-ZIP D Change TITLE Delete TITLE Addition NAME LEWIS, CAMERON NAME STREET ADDRESS 5 GOVERNOR WINTHROP BLVD STREET ADDRESS NEW LONDON, CT 06320 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE Jounne Shaffer NAME HEARTY, SEAN NAME 1 City Hall Plaza CITY OF DANBURY, 155 DEER HILL AVE STREET ADDRESS STREET ADDRESS Manchester, NH 03101 CITY-ST-ZIP CITY-ST-ZIP DANBURY, CT 06810

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 andress, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3-14-2007