

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 A
Secretary of State

DOCUMENT # P34379

1. Entity Name
NEPSA PROPERTY INVESTORS, INC.



Principal Place of Business
380 UNION STREET
STE 300
WEST SPRINGFIELD, MA 01089

Mailing Address
380 UNION STREET
STE 300
WEST SPRINGFIELD, MA 01089



04192006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3095407

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME GRINSPOON, STEVEN
STREET ADDRESS 255 WESTERLY RD
CITY-ST-ZIP WELLESLEY, MA 02493

TITLE VD
NAME ANTHONY, FRED
STREET ADDRESS 150 ASHFORD ROAD
CITY-ST-ZIP LONGMEADOW, MA 01106

TITLE PCD
NAME GRINSPOON, HAROLD
STREET ADDRESS 172 CRESTVIEW CIR
CITY-ST-ZIP LONGMEADOW, MA 01106

TITLE S
NAME GABERMAN, RICHARD M.
STREET ADDRESS 217 ARDSLEY ROAD
CITY-ST-ZIP LONGMEADOW, MA 01106

TITLE TD
NAME PAVA, JEREMY
STREET ADDRESS 258 WASHINGTON BLVD.
CITY-ST-ZIP SPRINGFIELD, MA 01108

TITLE V
NAME MNICH, JOHN
STREET ADDRESS 60 BROOKSIDE DRIVE
CITY-ST-ZIP SUFFIELD, CT 06078

U00000546623
05/11/06-80124-012 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 607, 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: JEREMY PAVA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/2006
Date

413.781.0712
Daytime Phone #