

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36955

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** PERRY, DEAN, ROGERS & PARTNERS, ARCHITECTS INC.

**Current Principal Place of Business:**

177 MILK ST.  
BOSTON, MA 02109

**New Principal Place of Business:**

**Current Mailing Address:**

177 MILK ST.  
BOSTON, MA 02109

**New Mailing Address:**

**FEI Number:** 04-2551909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PILGREEN, MARTHA A  
Address: 16 MILFORD STREET  
City-St-Zip: BOSTON, MA 02108

Title: S  
Name: MCCARTY, TOM  
Address: 39 EDMUND ROAD  
City-St-Zip: MARSHFIELD, MA 02050

Title: D  
Name: FREEMAN, MARK  
Address: 7 BELMONT STREET  
City-St-Zip: AMSBURY, MA 01913

Title: D  
Name: FOOTE, STEVEN  
Address: 11B WALNUT AVENUE  
City-St-Zip: CAMBRIDGE, MA 02140

Title: T  
Name: MCCARTY, TOM  
Address: 39 EDMUND ROAD  
City-St-Zip: MARSHFIELD, MA 02050

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARTHA PILGREEN

P

01/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date