

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90034 029 \*\*\*150.00

**DOCUMENT # F03000005398**

1. Entity Name  
**UNIFIRST-FIRST AID CORPORATION**



Principal Place of Business

**C/O JOHN B. BARTLETT  
68 JONSPIN ROAD  
WILMINGTON, MA 01887**

Mailing Address

**C/O JOHN B. BARTLETT  
68 JONSPIN ROAD  
WILMINGTON, MA 01887**

**54027322**



03242004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**52-2152049**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**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, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
CROATTI, RONALD D  
68 JONSPIN ROAD  
WILMINGTON, MA 01887**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD  
BARTLETT, JOHN B  
68 JONSPIN ROAD  
WILMINGTON, MA 01887**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
CROATTI, CYNTHIA  
68 JONSPIN ROAD  
WILMINGTON, MA 01887**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
LEWIS, TODD T  
4159 SHORELINE DRIVE  
ST. LOUIS, MO 63045**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 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:**

*John B. Bartlett*

**John B. Bartlett, V.P.**

**3/24/04**

**(978) 658-8888**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment-F03000005398

54027322

UNIFIRST-FIRST AID CORPORATION  
OFFICERS AND DIRECTORS

Name and Title

Business Address

Ronald D. Croatti  
President  
*Director*

68 Jonspin Road  
Wilmington, MA 01887

John B. Bartlett  
Vice President & Secretary  
*Director*

68 Jonspin Road  
Wilmington, MA 01887

Cynthia Croatti  
Treasurer  
*Director*

68 Jonspin Road  
Wilmington, MA 01887

Todd T. Lewis  
Vice President

4159 Shoreline Drive  
St. Louis, MO 63045