

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001065

Entity Name: SOLDIER ON, INC.**Current Principal Place of Business:**290 MERRILL ROAD
PITTSFIELD, MA 01201**Current Mailing Address:**290 MERRILL ROAD
PITTSFIELD, MA 01201 US**FEI Number:** 04-3240461**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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

Officer/Director Detail :

Title	DIRECTOR	Title	CHAIRMAN, DIRECTOR
Name	DOWNING, JOHN F	Name	MURPHY, COREY
Address	221 BARKER ROAD	Address	34 KIMBERLY DRIVE
City-State-Zip:	PITTSFIELD MA 01201	City-State-Zip:	SOUTH HADLEY MA 01075
Title	TREASURER, DIRECTOR	Title	DIRECTOR
Name	NOTSLEY, JOHN	Name	BRESNAHAN, JOHN
Address	75 BERKSHIRE DRIVE	Address	593 LAKEWAY DRIVE
City-State-Zip:	WILLIAMSTOWN MA 01247	City-State-Zip:	PITTSFIELD MA 01201
Title	DIRECTOR	Title	DIRECTOR
Name	ZAFFANELLA, CARLO	Name	O'BRIEN, DAN
Address	6 MELVILLE COURT	Address	283 STATE ROUTE 209
City-State-Zip:	LENOX MA 01240	City-State-Zip:	KINGSTON NY 12401
Title	PRESIDENT, CEO, DIRECTOR	Title	CFO, ASST. SECRETARY, ASST. TREASURER
Name	BUCKLEY, BRUCE	Name	PORTER, KEITH
Address	290 MERRILL ROAD	Address	290 MERRILL ROAD
City-State-Zip:	PITTSFIELD MA 01202	City-State-Zip:	PITTSFIELD MA 01201

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRUCE F. BUCKLEY**PRESIDENT****03/05/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY, DIRECTOR
Name GELLNER, LISA
Address 31 PARK TERRACE, APT.. A10
City-State-Zip: NEW YORK NY 10034

Title VICE CHAIR, DIRECTOR
Name MESSER, MICHAEL
Address 56 WESTVIEW TERRACE
City-State-Zip: EASTHAMPTON MA 01027

Title DIRECTOR
Name APPLE, CRAIG
Address 2 AMANDA WAY
City-State-Zip: NISKAUYNNA NY 12309

Title DIRECTOR
Name BALDWIN, GARY
Address 201 SANDY COVE
City-State-Zip: TINTON FALL NJ 07753