### 2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000002413

Entity Name: THE DOUG FLUTIE, JR. FOUNDATION FOR AUTISM, INC.

**FILED** Mar 21, 2023 **Secretary of State** 7825901877CC

# **Current Principal Place of Business:**

1661 WORCESTER ROAD

SUITE 102

FRAMINGHAM, MA 01701

# **Current Mailing Address:**

1661 WORCESTER ROAD SUITE 102

FRAMINGHAM, MA 01701 US

FEI Number: 04-3543134 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

PRESIDENT, DIRECTOR Title Title VP, DIRECTOR FLUTIE. DOUGLAS R Name Name FLUTIE. LAURIE M

Address 1661 WORCESTER ROAD Address 1661 WORCESTER ROAD SUITE 102

SUITE 102

SUITE 102

**DIRECTOR** 

NEWTON MA 02466

1661 WORCESTER ROAD

FRAMINGHAM MA 01701

FRAMINGHAM MA 01701 FRAMINGHAM MA 01701 City-State-Zip: City-State-Zip:

Title Title TREASURER, DIRECTOR, CO-CHAIR

KELLER, KEVIN L Name BLOUIN, DAVID R Name

1661 WORCESTER ROAD 2020 COMMONWEALTH AVE Address Address

SUITE 102

FRAMINGHAM MA 01701 City-State-Zip:

Title DIRECTOR Title DIRECTOR, CO-CHAIR, SECRETARY TIERNEY, JACK Name

CANTU, TINA Name

1661 WORCESTER ROAD Address

SUITE 102

City-State-Zip: FRAMINGHAM MA 01701

Title **DIRECTOR** 

Name MORRIS, DAVID CAMER, STEPHEN DR. Name

1661 WORCESTER ROAD Address Address 1661 WORCESTER ROAD

SUITE 102 SUITE 102

FRAMINGHAM MA 01701 City-State-Zip: City-State-Zip: FRAMINGHAM MA 01701

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City-State-Zip:

City-State-Zip:

Address

Title

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.

03/21/2023 SIGNATURE: TINA CANTU DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

Title DIRECTOR

Name GOLOBOY, MARK

Address 1661 WORCESTER ROAD

SUITE 102

City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR

Name BROVELLI, SHARON

Address 1661 WORCESTER ROAD

SUITE 102

City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR

Name BAIN, FABIENNE

Address 1661 WORCESTER ROAD

SUITE 102

City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR
Name PALMER, MIKE

Address 1661 WORCESTER RD STE 102

City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR

Name BUSH, JONATHAN

Address 1661 WORCESTER ROAD

SUITE 102

City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR

Name CHIRICHELLA, JOE

Address 1661 WORCESTER ROAD

SUITE 102

City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR

Name FAULKNER, ANDREA

Address 1661 WORCESTER RD STE 102

City-State-Zip: FRAMINGHAM MA 01701