

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000002413

FILED
Jan 10, 2017
Secretary of State
CC3320922911

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

Current Principal Place of Business:

1001 WORCESTER ROAD
FRAMINGHAM, MA 01701

Current Mailing Address:

1001 WORCESTER ROAD
FRAMINGHAM, MA 01701

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 :

Title PRESIDENT, DIRECTOR
Name FLUTIE, DOUGLAS R
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title VP, DIRECTOR
Name FLUTIE, LAURIE M
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title D
Name KELLER, KEVIN L
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title TREASURER, DIRECTOR, CO-CHAIR
Name BLOUIN, DAVID R
Address 2020 COMMONWEALTH AVE
City-State-Zip: NEWTON MA 02466

Title DIRECTOR
Name GREENDLINGER, RISA
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR, CO-CHAIR, SECRETARY
Name CANTU, TINA
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR
Name WAITKEVICH, ADAM
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR
Name MCKENZIE, MATTHEW
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

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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: LISA BORGES

EXECUTIVE DIRECTOR

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LYONS, ANTHONY
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title EXECUTIVE DIRECTOR
Name BORGES, LISA A
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR
Name MORRIS, DAVID
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR
Name KANJI, SHAMEZ
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR
Name BLECK, DANIEL
Address 1001 WORCESTER ROAD
City-State-Zip: FRAMINGHAM MA 01701