2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832706

Entity Name: CROSS COUNTRY MOTOR CLUB, INC.

Current Principal Place of Business:

ONE CABOT ROAD 4TH FLR MEDFORD, MA 02155

Current Mailing Address:

ONE CABOT ROAD 4TH FLR MEDFORD, MA 02155

FEI Number: 04-2530679

Name and Address of Current Registered Agent:

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

Certificate of Status Desired: No

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

Officer/Director Detail :

	Title	CHAIRMAN, DIRECTOR	Title	ASST. TREASURER
	Name	WOLK, SIDNEY	Name	FAULKNER, JAMES E
	Address	330 BEACON STREET	Address	19 PRINCETON ROAD
	City-State-Zip:	BOSTON MA 02116	City-State-Zip:	BURLINGTON MA 01803
	Title	VP, DIRECTOR	Title	VP, DIRECTOR
	Name	WOLK, HOWARD L	Name	WOLK, JEFFREY
	Address	22 PELHAM ROAD	Address	45 WOODLAND ROAD
	City-State-Zip:	WESTON MA 02493	City-State-Zip:	CHESTNUT HILL MA 02467
	Titlo		Title	VP. TREASURER
	Title		Title Name	VP, TREASURER
	Name	FERRICK, DAVID	Name	WARD, MARGARET
				,
	Name	FERRICK, DAVID	Name	WARD, MARGARET
	Name Address City-State-Zip:	FERRICK, DAVID 123 GRANT STREET LEXINGTON MA 02420	Name Address	WARD, MARGARET 9 WALNUT STREET
	Name Address City-State-Zip: Title	FERRICK, DAVID 123 GRANT STREET LEXINGTON MA 02420 SECRETARY	Name Address City-State-Zip:	WARD, MARGARET 9 WALNUT STREET NEWBURYPORT MA 01950
	Name Address City-State-Zip: Title Name	FERRICK, DAVID 123 GRANT STREET LEXINGTON MA 02420 SECRETARY NECHELES, PETER	Name Address City-State-Zip: Title Name	WARD, MARGARET 9 WALNUT STREET NEWBURYPORT MA 01950 CFO SWEENEY, KATHLEEN M
	Name Address City-State-Zip: Title	FERRICK, DAVID 123 GRANT STREET LEXINGTON MA 02420 SECRETARY	Name Address City-State-Zip: Title Name Address	WARD, MARGARET 9 WALNUT STREET NEWBURYPORT MA 01950 CFO SWEENEY, KATHLEEN M 211 LINDSAY POND ROAD
	Name Address City-State-Zip: Title Name	FERRICK, DAVID 123 GRANT STREET LEXINGTON MA 02420 SECRETARY NECHELES, PETER	Name Address City-State-Zip: Title Name	WARD, MARGARET 9 WALNUT STREET NEWBURYPORT MA 01950 CFO SWEENEY, KATHLEEN M

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: JAMES E. FAULKNER

04/29/2016 ASSISTANT TREASURER

Electronic Signature of Signing Officer/Director Detail

FILED Apr 29, 2016 Secretary of State CC9029356234

Date

Date