

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004703

Entity Name: SHEPLEY BULFINCH RICHARDSON AND ABBOTT
INCORPORATED**FILED**
Apr 13, 2018
Secretary of State
CC6298564722**Current Principal Place of Business:**2 SEAPORT LN
BOSTON, MA 02210**Current Mailing Address:**2 SEAPORT LN
BOSTON, MA 02210 US**FEI Number: 04-2504672****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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
Name ALIBER, JENNIFER
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210Title PRESIDENT
Name WEDGE, CAROLE
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210Title SECRETARY, DIRECTOR
Name BOWEN, SIDNEY III
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210Title CFO
Name HUGHES, EDWARD
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210Title DIRECTOR
Name HERZOG, JOSEPH
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210Title DIRECTOR
Name VOILAND, LUKE
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210Title DIRECTOR
Name WATSON, ANGELA
Address 2 SEAPORT LN
City-State-Zip: BOSTON MA 02210

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: CAROLE WEDGE**PRESIDENT****04/13/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date