

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001131

**Entity Name:** HANCOCK NATURAL RESOURCE GROUP, INC.**Current Principal Place of Business:**197 CLARENDON STREET  
BOSTON, MA 02116**Current Mailing Address:**197 CLARENDON STREET  
BOSTON, MA 02116 US**FEI Number:** NOT APPLICABLE**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 CHAIRMAN  
Name CHRISTENSEN, DANIEL P  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title DIRECTOR  
Name ADOLPHE, KEVIN  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title DIRECTOR, CEO, PRESIDENT  
Name PERESSINI, WILLIAM E  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title DIRECTOR  
Name THOMSON, WARREN A  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title CFO  
Name STEINER, WILFRED  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title TREASURER  
Name KOELKER, TIMOTHY  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title SECRETARY  
Name BEAGEN, MARGARET  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

Title DIRECTOR  
Name SOTORP, KAI  
Address 197 CLARENDON STREET  
City-State-Zip: BOSTON MA 02116

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

**SIGNATURE: MARGARET BEAGEN****SECRETARY****04/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	HARTZ, SCOTT
Address	197 CLARENDON STREET
City-State-Zip:	BOSTON MA 02116