## 2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004792

Entity Name: TECOGEN INC.

#### **Current Principal Place of Business:**

45 1ST AVE. WALTHAM, MA 02451

#### **Current Mailing Address:**

45 1ST AVE. WALTHAM, MA 02451 US

### FEI Number: 04-3536131

#### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 :**

CHICOL/PHO			
Title	CEO, DIRECTOR	Title	PRESIDENT
Name	LOCKE, BENJAMIN	Name	PANORA, ROBERT
Address	45 1ST AVE.	Address	45 1ST AVE.
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451
Title	DIRECTOR	Title	DIRECTOR
Name	GHONIEM, AHMED	Name	GALITEVA, ANGELINA
Address	45 1ST AVE.	Address	45 1ST AVE.
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR LEWIS, EARL R. III	Title Name	DIRECTOR HOLUBOW, FRED
Name Address	LEWIS, EARL R. III	Name	HOLUBOW, FRED 45 1ST AVE.
Name Address	LEWIS, EARL R. III 45 1ST AVE.	Name Address	HOLUBOW, FRED 45 1ST AVE.
Name Address City-State-Zip:	LEWIS, EARL R. III 45 1ST AVE. WALTHAM MA 02451	Name Address City-State-Zip:	HOLUBOW, FRED 45 1ST AVE. WALTHAM MA 02451
Name Address City-State-Zip: Title	LEWIS, EARL R. III 45 1ST AVE. WALTHAM MA 02451 SECRETARY	Name Address City-State-Zip: Title	HOLUBOW, FRED 45 1ST AVE. WALTHAM MA 02451 DIRECTOR
Name Address City-State-Zip: Title Name Address	LEWIS, EARL R. III 45 1ST AVE. WALTHAM MA 02451 SECRETARY WHITING, JOHN K. IV	Name Address City-State-Zip: Title Name	HOLUBOW, FRED 45 1ST AVE. WALTHAM MA 02451 DIRECTOR HATOSPOULOS, JOHN N. 45 1ST AVE.

## Continues on page 2

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: JOHN K. WHITING, IV

SECRETARY

04/19/2022

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 19, 2022 Secretary of State 5990857774CC

Date

## **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	TREASURER, CFO
Name	JENKINS, RALPH	Name	DESCHENES, ROBERT P.
Address	45 1ST AVE.	Address	45 1ST AVE.
City-State-Zip:	WALTHAM MA 02451	City-State-Zip:	WALTHAM MA 02451