2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000974

Entity Name: DIGIORGIO ASSOCIATES INC.

Current Principal Place of Business:

225 FRIEND STREET BOSTON. MA 02114

Current Mailing Address:

225 FRIEND STREET BOSTON, MA 02114 US

FEI Number: 04-2842901 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH,LTD.,INC. 115 NORTH CALHOUN ST.

SUITE 4

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

FILED Jan 12, 2016

Secretary of State

CC3276752290

Officer/Director Detail:

Title	PRESIDENT	Title	TREASURER
Name	WEAVER, JOHN W	Name	WEAVER, JOHN W
Address	10 SANCTUARY LANE	Address	10 SANCTUARY LANE
City-State-Zip:	HOPKINTON MA 01748	City-State-Zip:	HOPKINTON MA 01748

Title CHIEF EXECUTIVE OFFICER Title **SECRETARY** ZYCHOWICZ, JOHN JR. Name Name KOVACS, STEVE H Address 245 ATHERTON STREET Address 37 STONE CHURCH ROAD City-State-Zip: MILTON MA 02186 City-State-Zip: TIVERTON RI 02878

Title DIRECTOR Title DIRECTOR

NameLUCHETTI, CHRISTOPHERNameWEAVER, JOHN WAddress465 ELM STREETAddress10 SANCTUARY LANECity-State-Zip:E. BRIDGEWATER MA 02333City-State-Zip:HOPKINTON MA 01748

Title DIRECTOR Title DIRECTOR

Name ZYCHOWICZ, JOHN JR. Name PHELPS, DANIEL

Address 245 ATHERTON STREET Address 769 CROSS POINT ROAD

City-State-Zip: MILTON MA 02186 City-State-Zip: EDGECOMB ME 04556

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 WEAVER PRESIDENT 01/12/2016

Electronic Signature of Signing Officer/Director Detail

Date