

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10613

**FILED**  
**Jun 12, 2014**  
**Secretary of State**  
**CC6824469744**

**Entity Name:** LEMESSURIER CONSULTANTS INC.

**Current Principal Place of Business:**

1380 SOLDIERS FIELD ROAD  
BOSTON, MA 02135

**Current Mailing Address:**

1380 SOLDIERS FIELD ROAD  
BOSTON, MA 02135

**FEI Number: 04-2872619**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33311 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 VPD  
Name SHREVE, GREGORY D  
Address 1380 SOLDIERS FIELD ROAD  
City-State-Zip: BOSTON MA 02135

Title PD  
Name CHEEVER, PETER J  
Address 1380 SOLDIERS FIELD ROAD  
City-State-Zip: BOSTON MA 02135

Title VPD  
Name HENIGE, RICHARD A  
Address 1380 SOLDIERS FIELD ROAD  
City-State-Zip: BOSTON MA 02135

Title VPD  
Name LOVALLO, WILLIAM  
Address 1380 SOLDIERS FIELD ROAD  
City-State-Zip: BOSTON MA 02135

Title C  
Name TAURINSKAS, M M  
Address 1380 SOLDIERS FIELD ROAD  
City-State-Zip: BOSTON MA 02135

Title DTS  
Name RAVINDRA, MYSORE V  
Address 1380 SOLDIERS FIELD ROAD  
City-State-Zip: BOSTON MA 02135

*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: PETER CHEEVER**

**PRESIDENT**

**06/12/2014**

Electronic Signature of Signing Officer/Director Detail

Date