

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P36955

**Entity Name:** PERRY, DEAN, ROGERS & PARTNERS, ARCHITECTS INC.

**Current Principal Place of Business:**

177 MILK ST.  
BOSTON, MA 02109

**Current Mailing Address:**

177 MILK ST.  
BOSTON, MA 02109 US

**FEI Number:** 04-2551909

**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           TREASURER  
Name           BROCKELMAN, CYNTHIA ANNE  
Address        749 SOMERVILLE AVENUE  
                  APARTMENT 3  
City-State-Zip: SOMERVILLE MA 02143

Title           PRESIDENT  
Name           FREEMAN, MARK  
Address        15 ATWOOD STREET  
City-State-Zip: NEWBURYPORT MA 01950

Title           DIRECTOR  
Name           SENKIER, RYAN  
Address        54 CENTRAL AVENUE  
City-State-Zip: MILTON MA 02186

Title           SECRETARY  
Name           SHAFER, TODD  
Address        5 TANNERY BROOK ROAD  
                  APARTMENT 4  
City-State-Zip: SOMERVILLE MA 02144

*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:** TODD SHAFER

**SECRETARY**

**01/24/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date