FILED May 04, 2001 8:00 am Secretary of State

05-04-2001 90159 007 ***150 0

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 823900				05-04-2	001 90159 007 ***1	50.00
•	ERKSHIRE EQUITY SALES					
Principal Place of Business Mailing Address				D0046844		
700 South Street 700 South Street Pittsfield, MA 01201 Pittsfield, MA 012						
2. Principal Place of Business 3. Mailing Add				7		
Suite, Apl. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 04-2440552		ed For policable
Zip	Country	Zip	Country	5. Certificate of Status Desired	S8.75 Addition	nal
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
Name						
12	ne Prentice-Hall Corp 201 Hays Street	(P.O. Box Number is Not Acceptable)			
Suite 105 Tallahassee FL 32301					· · · · · · · · · · · · · · · · · · ·	
			City	**************************************	FL Zip Code	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE						
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be						
	ria on back)	the transfer of the second sections	o e boydes i a ko a a a Table a la l	Trust Fund Contribution		
11.	OFFICERS AND D	DIRECTORS	12.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN	
TITLE NAME	Director, Presider Karl F. Volkman	nt □ Delate	TITLE NAME		☐ Change [Addition 8
STREET ADDRESS CITY+ST-ZIP	700 South Street		STREET ADDRESS CITY-ST-ZIP	,		Additton S
TITLE NAME	Director	☐ Delete	TITLE NAME		☐ Change ☐	Addition
STREET ADDRESS	James W. Zilinski 700 South Street		STREET ADDRESS CITY-ST-ZIP			
TITLE	Pittsfield, NA 012 Director, Treasurer		TITLE	-	Change] Addition
NAME STREET ADDRESS	Henry W. Glass, Jr. 700 South Street Pittsfield, MA 012	101	NAME STREET ADDRESS		-	
CITY-ST-ZIP	Pittsfield, MA 012	CUI Delete	CITY -ST- ZIP TITEE		Change [Addition
NAME STREET ADDRESS			NAME Street adoress			
GITY-ST-ZIP TITLE		□ Delete	CHY-SI-ZIP		Change [Addition
NAME STREET ADDRESS			NAME STREET ADDRESS			•
CITY -ST-ZIP			CITY-ST-ZIP			
TITLE NAME		☐ Delete	TITLE NAME		☐ Change] Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of upplement freport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the acceiver or at the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with the acceptance of the empowered.						
SIGNATURE: Karl F. Volkman 4/17/2001 413-499-4321 BIGNATURE AND TYPED OR PRINTED NAME OF BIGNANG OFFICER OR DIRECTOR Date Date Date Date Date Date Description Proper Date Date Date Date Description Proper Date Date						
					 	