

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 20, 2001 8:00 am
Secretary of State

06-20-2001 90013 028 ***558.75

DOCUMENT # 832457

1. Entity Name

SASAKI ASSOCIATES, INC.

Principal Place of Business

**64 PLEASANT ST.
WATERTOWN MA 02172**

Mailing Address

**64 PLEASANT ST.
WATERTOWN MA 02172**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **04-2230445**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **S** ☐ Delete
NAME **SUKEFORTH, JAMES A.**
STREET ADDRESS **3 KITSON PARK DRIVE**
CITY-ST-ZIP **LEXINGTON MA**

TITLE **P** ☐ Delete
NAME **BASSETT, KENNETH E.**
STREET ADDRESS **PAGE ROAD**
CITY-ST-ZIP **LINCOLN MA**

TITLE **T** ☒ Delete
NAME **ADAMS, KERRY S.**
STREET ADDRESS **1 LANGLEY LANE**
CITY-ST-ZIP **ANDOVER MA**

TITLE **D** ☐ Delete
NAME **RESNICK, ALAN I.**
STREET ADDRESS **34 NORTH ROAD**
CITY-ST-ZIP **EAST KINGSTON NH 03827**

TITLE **D** ☐ Delete
NAME **VIKLUND, ROY V.**
STREET ADDRESS **216 ROYAL STREET**
CITY-ST-ZIP **WATERTOWN MA 02172**

TITLE **D** ☐ Delete
NAME **FREEDMAN, NANCY B**
STREET ADDRESS **29 FORTY ACRES DRIVE**
CITY-ST-ZIP **WAYLAND MA 01778**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME **James A. Sukeforth**
STREET ADDRESS **3 Kitson Park Drive**
CITY-ST-ZIP **Lexington, MA 02421**

TITLE ☐ Change ☒ Addition
NAME **Director**
STREET ADDRESS **Neslon Scott Smith**
CITY-ST-ZIP **3633 Divisadero**
San Francisco, CA 94123

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing 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 or supplemental report 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 receiver or trustee 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Sukeforth, Treasurer & Secretary

Date

Daytime Phone #

CR2E034 (10/00)