2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844691

Entity Name: TECHNICAL AID CORPORATION

FILED Apr 18, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

888 WASHINGTON ST
DEDHAM, MA 02026

220 NORWOOD PARK SOUTH
NORWOOD, MA 02062

Current Mailing Address: New Mailing Address:

P.O. BOX 9100
DEDHAM, MA 020279100
P.O. BOX 9130
NORWOOD, MA 020629130 US

FEI Number: 04-2457180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC. 515 E. PARK AVENUE 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

OFFICERS AND DIRECTORS:

Title:

Name: KLAUBER, JAMES

Address: 220 NORWOOD PARK SOUTH City-St-Zip: NORWOOD, MA 02062

Title:

Name: ABADIE, CHARLES

Address: 220 NORWOOD PARK SOUTH City-St-Zip: NORWOOD, MA 02062

Title: S

Name: MANN, JONATHAN T

Address: 220 NORWOOD PARK SOUTH City-St-Zip: NORWOOD, MA 02062

Title: VP

Name: ELLIS, NATHAN

Address: 220 NORWOOD PARK SOUTH City-St-Zip: NORWOOD, MA 02062

Title: AT

Name: BLACK, FRED

Address: 220 NORWOOD PARK SOUTH City-St-Zip: NORWOOD, MA 02062

Title: TASD

Name: LYMBERY, MARK

Address: 220 NORWOOD PARK SOUTH City-St-Zip: NORWOOD, MA 02062

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: NATHAN ELLIS VP 04/18/2011