

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90237 040 \*\*\*150.00

0670238 AB

**DOCUMENT # 850444**

1. Entity Name

PARSONS MAIN, INC.



Principal Place of Business

Mailing Address

SOUTHEAST TOWER  
PRUDENTIAL CENTER  
BOSTON MA 02199

100 WEST WALNUT STREET  
ROOM T-1107  
PASADENA CA 91124

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-2734618

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete  
NAME MILLER, RICHARD G  
STREET ADDRESS 100 W WALNUT ST  
CITY-ST-ZIP PASADENA CA 91124

TITLE PD ☐ Change ☒ Addition  
NAME John A. Scott  
STREET ADDRESS 100 West Walnut Street  
CITY-ST-ZIP Pasadena, CA 91124

TITLE VT ☐ Delete  
NAME JONES, ROBERT W  
STREET ADDRESS 100 W WALNUT ST  
CITY-ST-ZIP PASADENA CA CA 91124

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

TITLE SC ☐ Delete  
NAME NUGENT, ROBERT F  
STREET ADDRESS 30 DAN RD  
CITY-ST-ZIP CANTON MA 02021

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

TITLE VASA ☐ Delete  
NAME COLE, SUSAN  
STREET ADDRESS 100 W WALNUT STR  
CITY-ST-ZIP PASADENA CA

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

TITLE VP ☐ Delete  
NAME THOMSEN, IAN R  
STREET ADDRESS 100 W WALNUT ST  
CITY-ST-ZIP PASADENA CA 91124

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

TITLE AS ☐ Delete  
NAME JOHANSON, THOMAS L  
STREET ADDRESS 100 W WALNUT ST  
CITY-ST-ZIP PASADENA CA 91124

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas L. Johanson April 15, 2003 (626) 440-2000

Date

Daytime Phone #

CR2E034 (10/02)