2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # 852800 Mar 13, 2000 8:00 am **Secretary of State** KAZMAIER ASSOCIATES, INC. 03-13-2000 90035 003 ***150.00 Principal Place of Business Mailing Address 676 ELM ST 676 FLM ST CONCORD MA 01742 CONCORD MA 01742-2101 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 15th . 344 City & State 4. FEI Number Applied For City & State 04-2604321 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change ☐ Delete TITI E TITLE NAME NAME KAZMAIER, RICHARD W.,JR. STREET ADDRESS Robert H. Ruxin STREET ADDRESS 100 ANCHOR DRIVE #29 CITY-ST-ZIP 8 Larchmont Lane, Lexington, MA 02420 CITY-ST-ZIP KEY LARGO FL Delete □ Change TITLE. TITLE NAME NAME HUGGINS, CHARLES E. JR Poirier, Dean P. STREET ADDRESS STREET ADDRESS **54 HAWTHORNE LANE** 130 Appleton Street, Unit 1C CITY-ST-ZIP CITY-ST-ZIP CONCORD MA Boston, MA-02116 ---☐ Change X Addition ☐ Delete TITLE TITLE NAME KAZMAIER, PATRICIA H. NAME Kazmaier, Patricia H. STREET ADDRESS STREET ADDRESS 100 ANCHOR DRIVE #29 24 Dockside Lane, PMB 29 Key Largo, Florida 3303 CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL Addition ☐ Delete TITLE ☐ Change NAME ARMKNECT, RICHARD F NAME Char, Paula F. STREET ADDRESS STREET ADDRESS 51 PLAINFIELD RD. 152 Harbor View Road CITY-ST-ZIP CITY-ST-ZIP CONCORD MA 01742 Milton, MA 02186 ☐ Delete ☐ Change Addition TITLE Asst T, Asst C, Asst S NAME RUXIN, ROBERT H. Gnall, John E. Gnall STREET ADDRESS STREET ADDRESS 8 LARCHMONT LN 35 Washington Drive CITY-ST-ZIP CITY-ST-ZIP **LEXINGTON MA** Acton, MA 01720 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.