

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90102 006 ***150.00

DOCUMENT # 858146

1. Entity Name

NEW ENGLAND DETROIT DIESEL-ALLISON, INC.

DO NOT WRITE IN THIS SPACE

80050445

2. Principal Place of Business

90 Bay State Road

Suite, Apt. #, etc.

3. Mailing Address

90 Bay State Road

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Wakefield, MA 01880

Zip

Country

City & State

Wakefield, MA 01880

Zip

Country

4. FEI Number

04-2537148

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Frank J. Rief, III

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

111 Madison Street

City
Tampa

FL

Zip Code
33601

**DO NOT WRITE
IN THIS SPACE**

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) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
|--|--|--|---------------------------------------|
| CD Knopf, Charles E., Jr. 6680 Harbor Circle Stuart, FL | | | |
| VC Knopf, John M. 232 Larch Row Wenham, MA 01984 | | | |
| P Manning, Jeffrey P. 90 Bay State Road Wakefield, MA | | | DO NOT WRITE IN THIS SPACE |
| STD Manning, Jeffrey P. 90 Bay State Road Wakefield, MA | | | |
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/02

Date

781-246-1810

Daytime Phone #

CR2E034B (12/01)