2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 858146

FILED Jan 30, 2009 Secretary of State

Entity Name: NEW ENGLAND DETROIT DIESEL-ALLISON, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
90 BAY STATE RD WAKEFIELD, MA 018	80 US	90 BAY STATE ROAD WAKEFIELD, MA 018		
Current Mailing Addı	ress:	New Mailing Address	s:	
90 BAY STATE RD WAKEFIELD, MA 018	80 US			
FEI Number: 04-2537148	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address o	f Current Registered Agent:	Name and Address of	of New Registered Agent:	
RIEF, FRANK J III 111 MADISON STREE TAMPA, FL 33601	ET US			
The above named enti	ty cubmite this statement for the	ournose of changing its registere	d office or registered agent, or both,	
	ty submits this statement for the p		a chies of regions and agent, or boun,	
n the State of Florida. SIGNATURE:	ty submits this statement for the p	our peed of onlinging to regions	a cinco ci registorea agent, er zeur,	
n the State of Florida. SIGNATURE:	ronic Signature of Registered Ag		Date	
n the State of Florida. BIGNATURE:Electr				
n the State of Florida. BIGNATURE:Electr	ronic Signature of Registered Agcing Trust Fund Contribution ().	ent		
n the State of Florida. BIGNATURE: Election Election Campaign Finance DFFICERS AND DIRE	ronic Signature of Registered Agcing Trust Fund Contribution (). ECTORS: () Delete ARLES E JR OR CIRCLE	ent	Date	
n the State of Florida. BIGNATURE: Electron Campaign Finance DFFICERS AND DIRE Title: CD Idame: KNOPF, CH/ Address: 6880 HARBO City-St-Zip: STUART, FL Title: VC Idame: KNOPF, JOH Address: 232 LARCH	ronic Signature of Registered Agring Trust Fund Contribution (). ECTORS: () Delete ARLES E JR OR CIRCLE . US () Delete HN M	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEFFERY P. MANNING PSTD 01/30/2009