

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 08, 2001 8:00 am**  
**Secretary of State**

08-08-2001 90007 037 \*\*\*158.75

<b>DOCUMENT # 858156</b>			
1. Entity Name <b>Bulfinch Associates, Inc.</b>			
Principal Place of Business <b>17051 Ryton Lane Boca Raton, FL 33496</b>		Mailing Address <u>old</u> <b>29 Northstone Road Swampscott, MA 01907-1652</b>	
2. Principal Place of Business		3. Mailing Address <u>New</u> <b>2 Togan Way</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <b>Marblehead, MA</b>	
Zip	Country	Zip <b>01945-2520</b>	Country
4. FEI Number <b>04-2791804</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
Name <b>Allen, Mark</b>		Name	
Street Address (P.O. Box Number is Not Acceptable) <b>17051 Ryton Lane Boca Raton, FL 33496</b>		Street Address (P.O. Box Number is Not Acceptable)	
City <b>FL</b>		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.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input checked="" type="checkbox"/> (See criteria on back)		<b>FILE NOW!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD Allen, Mark L. 17051 Ryton Lane Boca Raton FL 33496 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS Allen, Mark L. 17051 Ryton Lane Boca Raton FL 33496 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.			
SIGNATURE: <u>Mark L. Allen, Pres.</u> 7/31/01 (781) 639-9955 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

CR2E034 (11/00)

Mailing address - Bulfinch Associates, Inc.  
 2 Togan Way