2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005
Secretary of State

DOCUMENT# F00000006935

Entity Name: MARY MCKENNA & ASSOCIATES, INC.

Current Principal Place of Business:

160 POND ST
WINCHESTER, MA 01890

New Principal Place of Business:

123 WASHINGTON ST
WINCHESTER, MA 01890

Current Mailing Address:

160 POND ST
WINCHESTER, MA 01890

New Mailing Address:

123 WASHINGTON ST
WINCHESTER, MA 01890

FEI Number: 04-3466993 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCKENNA-SULLIVAN, MARY E AIA
Address: 160 POND STREET
City-St-Zip: WINCHESTER, MA 01890

Title: VTD ( ) Delete
Name: SULLIVAN, DAVID E
Address: 160 POND STREET
City-St-Zip: WINCHESTER, MA 01890

Title: CLRK ( ) Delete
Name: SULLIVAN, JEANNE
Address: 23 LOCUST STREET
City-St-Zip: WOBURN, MA 01801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MCKENNA-SULLIVAN, MARY E AIA
Address: 123 WASHINGTON STREET
City-St-Zip: WINCHESTER, MA 01890

Title: VTD (X) Change ( ) Addition
Name: SULLIVAN, DAVID E
Address: 123 WASHINGTON STREET
City-St-Zip: WINCHESTER, MA 01890

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID E. SULLIVAN VTD 01/24/2005

Electronic Signature of Signing Officer or Director — Date