


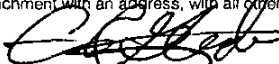
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Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90160 007 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

50024544



DOCUMENT # F02000000298			
1. Entity Name JACQUES WHITFORD COMPANY, INC.			
Principal Place of Business 27 CONGRESS STREET PORTSMOUTH, NH 03801		Mailing Address P.O. BOX 4696 PORTSMOUTH, NH 03802-4696	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		02222005 Chg-P CR2E034 (10/03)	
4. FEI Number 01-0384101		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional - Fee Required	
6. Name and Address of Current Registered Agent SHIRER, JASON 14905 ARBOR SPRING ROAD, APT 108 TAMPA, FL 33624		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GENEGA, STANLEY 3 GREEN STREET MILTON, MA 02186 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Craig R. Gendron 39 Dumbarton Oaks Stratham, NH 03885 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO YOU DEN, ROBERT P 33 DEMPSTER CRESCENT MINEVILLE B2Z 1J6, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T S Todd Bethune 5830 Gorsebrook Avenue Halifax, Nova Scotia B3H 1G2 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LAURENCE, RONALD B 124 GREAT BAY ROAD GREENLAND, NH 03840 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Victoria Dorokhin 800 W. Cummings Park, Suite 5650 Woburn, MA 01801 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HILL, DAVID 9 TOWER ROAD, GARISH ISLAND KITTERY POINT, ME 03905 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Vincenf. Jacques 36 Cobble Hill Road Lincoln, RI 02865 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GENDRON, CRAIG R 27 CONGRESS STREET PORTSMOUTH, NH 03801 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Kimm Perlin 450 S. Gravers Road, Suite 1056 Plymouth Meeting, PA 19462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DEL MASTRO, GREG 70 SNAKE DEN RD. RINGWOOD, NJ 07456 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robert P. Youden 33 Dempster Crescent Mineville, NS B2Z 1J6 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		603-431-4899	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Craig R. Gendron, Vice President		Date Daytime Phone #	

ATTACHMENT

#F02000000298

50024144

FLORIDA DEPARTMENT OF STATE

**2005 For Profit Corporation Annual Report
FOR
JACQUES WHITFORD COMPANY, INC.**

ATTACHMENT

OFFICERS and DIRECTORS (ADDITIONAL)

Title: D
Name: Tim Olson
Street Address: 3 Spectacle Lake Drive
City-St-Zip: Dartmouth, Nova Scotia Canada B3B 1W8