2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005051

FILED Mar 20, 2008 Secretary of State

Entity Name: NEW ENGLAND FORESTRY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 32 FOSTER STREET LITTLETON, MA 01460 **Current Mailing Address: New Mailing Address:** 32 FOSTER STREET LITTLETON, MA 01460 FEI Number: 04-2024022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete INGRAHAM, TIMOTHY A PRES. Name: Name: 42 THISSELL ST. Address: Address: City-St-Zip: PRIDES CROSSING, MA 01965 City-St-Zip: Title: () Delete Title: () Change () Addition DENORMANDIE, PHILIP Y VP Name: Name: Address: 12 MARSHALL STREET Address: City-St-Zip: BOSTON, MA 02108 City-St-Zip: Title: () Delete Title: () Change () Addition PERKINS, RICHARD F TREAS Name: Name: 333 RED ACRE ROAD Address: Address: City-St-Zip: STOW, MA 01775 City-St-Zip: Title: MS () Delete Title: MRS (X) Change () Addition Name: BUTLER, ELIZABETH R DIRECT Name: BRACE MARTINEZ, LINDSEY DIRECT 1 MONUMENT SQUARE 82 HIGHLAND STREET Address: Address: City-St-Zip: PORTLAND, ME 04101 City-St-Zip: DEDHAM, MA 02026 Title: () Delete Title: () Change () Addition LUDINGTON, MERLOYD CLERK Name: Name: 102 CHESTNUT STREET Address: Address: City-St-Zip: BOSTON, MA 02108 City-St-Zip: Title: () Delete Title: (X) Change () Addition DUKE, WINSLOW DIRECTO MARTINEZ, LINDSEY BRACE DIRECTO Name: Name: Address: 82 HIGHLAND STREET Address: 84 JEWETT STREET DEDHAM, MA 02026 City-St-Zip: PEPPERELL, MA 01463 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD J DEVENNE COO 03/20/2008