

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 18, 2007 8:00 am
Secretary of State

05-18-2007 90025 007 ***150.00

DOCUMENT # F05000004687

1. Entity Name
IMAGITAS, INC.



Principal Place of Business
48 WOERD AVENUE
WALTHAM, MA 02453

Mailing Address
ONE ELMCROFT RD.
STAMFORD, CT 06926-0700



04122007 No Chg-P CR2E034 (11/05)

4. FEI Number
~~31-1347889~~ 31-1349889 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE S
NAME CORN, AMY
STREET ADDRESS ONE ELMCROFT RD
CITY-ST-ZIP STAMFORD, CT 069260700

TITLE VT
NAME SHAN, HELEN
STREET ADDRESS ONE ELMCROFT RD
CITY-ST-ZIP STAMFORD, CT 069260700

TITLE T
NAME BEECHER, THOMAS R III
STREET ADDRESS 48 WOERD AVENUE
CITY-ST-ZIP WALTHAM, MA 02453

TITLE P
NAME BEECHER, THOMAS R
STREET ADDRESS 48 WOERD AVENUE
CITY-ST-ZIP WALTHAM, MA 02453

TITLE V
NAME JOHNSON, BARRET S
STREET ADDRESS ONE ELMCROFT RD
CITY-ST-ZIP STAMFORD, CT 069260700

TITLE D
NAME MONAHAN, MICHAEL
STREET ADDRESS ONE ELMCROFT RD
CITY-ST-ZIP STAMFORD, CT 069260700

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRET S. JOHNSON

Date

4/24/07 (203) 351-7652

Daytime Phone #

ATTACHMENT

40116344

#F05000004687

IMAGITAS, INC.

OFFICERS & DIRECTORS

Terms of Office through 5/2007

<u>NAME</u>	<u>TITLE</u>	
Thomas R. Beecher III	President	<u>Business Address:</u> 48 Woerd Avenue Waltham, MA 02453-3826
John H. Ward	Vice President	
Michael Monahan	Vice President	
Barret S. Johnson	Vice President	
Helen Shan	Vice President and Treasurer	
Amy C. Corn	Secretary	
Patricia M. Johnson	Assistant Secretary	

DIRECTORS

Michael Monahan
Bruce P. Nolop
Helen Shan

Business Address

Imagitas, Inc.
c/o Pitney Bowes Inc.
One Elmcroft Road, MSC 6101
Stamford, CT 06926-0700

5/8/06