

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005012

Entity Name: MCNAMARA/SALVIA INC.

FILED
Jul 13, 2007
Secretary of State

Current Principal Place of Business:

160 FEDERAL STREET
BOSTON, MA 02110

New Principal Place of Business:

Current Mailing Address:

160 FEDERAL STREET
BOSTON, MA 02110

New Mailing Address:

FEI Number: 04-2988134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: SALVIA, JOSEPH A
Address: 45 MT. VERNON STREET UNIT 4B
City-St-Zip: BOSTON, MA 02118

Title: DP () Delete
Name: MCNAMARA, ROBERT J
Address: 63 ATLANTIC AVENUE 11-E
City-St-Zip: BOSTON, MA 02110

Title: DT () Delete
Name: SALVIA, MARIA C
Address: 45 MT VERNON STREET UNIT 4B
City-St-Zip: BOSTON, MA 02118

Title: S () Delete
Name: DESARO, MARYELLEN
Address: 316 RANDALL ROAD
City-St-Zip: BERLIN, MA 01503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARYELLEN DESARO

MS.

07/13/2007

Electronic Signature of Signing Officer or Director

Date