

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002678

FILED
Feb 23, 2011
Secretary of State

Entity Name: 5D INFORMATION MANAGEMENT, INC.

Current Principal Place of Business:

400 WOOD ROAD
BRAINTREE, MA 02184

New Principal Place of Business:

Current Mailing Address:

400 WOOD ROAD
BRAINTREE, MA 02184

New Mailing Address:

FEI Number: 04-3326218

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

OFFICERS AND DIRECTORS:

Title: DIR
Name: LOPEZ, ALICIA R
Address: 400 WOOD ROAD
City-St-Zip: BRAINTREE, MA 02184

Title: DIR
Name: LINDOP, CHRISTOPHER
Address: 400 WOOD RD.
City-St-Zip: BRAINTREE, MA 02184

Title: PRES
Name: CONNEELY, JANET
Address: 400 WOOD ROAD
City-St-Zip: BRAINTREE, MA 02184

Title: TRES
Name: KUMAR, RIJU
Address: 400 WOOD ROAD
City-St-Zip: BRAINTREE, MA 02184

Title: SEC
Name: LOPEZ, ALICIA R
Address: 400 WOOD ROAD
City-St-Zip: BRAINTREE, MA 02184

I hereby 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 all other like empowered.

SIGNATURE: ALICIA R. LOPEZ

SEC

02/23/2011

Electronic Signature of Signing Officer or Director

Date