

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002825

FILED  
Apr 28, 2011  
Secretary of State

Entity Name: SENTINEL SECURITIES, INC.

**Current Principal Place of Business:**

55 WALKERS BROOK DRIVE  
SUITE 100  
READING, MA 01867

**New Principal Place of Business:**

**Current Mailing Address:**

55 WALKERS BROOK DRIVE  
SUITE 100  
READING, MA 01867

**New Mailing Address:**

FEI Number: 04-3527574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NEWMAN, ANDREW  
9155 S DADELAND BLVD SUITE 1512  
MIAMI, FL 33156 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: COO  
Name: SCARPELLO, DAVID A  
Address: 9 RENEE DR  
City-St-Zip: WAKEFIELD, MA 01880

Title: PRES  
Name: CARAS, MARC  
Address: 13 CANTERBURY RD  
City-St-Zip: LYNNFIELD, MA 01940

Title: VP  
Name: CARNEVALE, JOHN A  
Address: 15 MORNINGSIDE CIRCLE  
City-St-Zip: BOXFORD, MA 01921

Title: D  
Name: ADOLF, RUEDIGER  
Address: 257 CPW  
City-St-Zip: NEW YORK, NY 10022

Title: CCO  
Name: NESTOR, JAMES  
Address: 14 ROSEMONT ST  
City-St-Zip: MALDEN, MA 02148

Title: VP  
Name: DIMASE, ROBERT M  
Address: 1681 CENTRAL AVENUE  
City-St-Zip: NEEDHAM, MA 02492

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: DAVID SCARPELLO

COO

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date