

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2007 8:00 am
Secretary of State

01-30-2007 90007 030 ***158.75

DOCUMENT # F93000000963

1. Entity Name
DIMEN FINANCIAL GROUP, INC.



Principal Place of Business
**3404 VIA LIDO
SUITE A
NEWPORT BEACH, CA 92663 US**

Mailing Address
**3404 VIA LIDO
SUITE A
NEWPORT BEACH, CA 92663 US**

400006341



2. Principal Place of Business - No P.O. Box #
3404 VIA LIDO

3. Mailing Address
49 CHURCH STREET

Suite, Apt. #, etc.
SUITE B

Suite, Apt. #, etc.
SUITE B

01252007 Chg-P CR2E034 (12/06)

City & State
NEWPORT BEACH, CA

City & State
WHITINSVILLE, MA

4. FEI Number
33-9906749

Applied For
Not Applicable

Zip
92663

Country
USA

Zip
01588

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAWKINS, PHILLIP D
1881 N.E. 26 STREET
STE 220
FORT LAUDERDALE, FL 33305**

Name
FL

Street Address (P.O. Box Number is Not Acceptable)

City
FL

Zip Code

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 re-registering)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**P
SMITH, JR, THOMAS F
370 DILLON LANE
SWANSEA, MA 02777**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
MEICHELBECK, Joseph R
44 Fay Mountain Road
Grafton, MA 01519**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**CEO
REDDING, KENNETH J
442 BLACKSTONE STREET
UXBRIDGE, MA 01569**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**T
DAY, KEVIN R
17 MONZA RD
NASHUA, NH 03060**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**CD
CLARKE, JR, ROBERT B
7 QUAKER LANE
NORTHBRIDGE, MA 01534**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
KROLL, MICHAEL J
22 OAK STREET
UXBRIDGE, MA 01569**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
WICKSTROM, TIMOTHY P
246 HILL STREET
WHITINSVILLE, MA 01588**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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:

Thomas F. Smith Jr., Pres. 1/25/07 800 286-8073

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #