

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # F95000001467 1. Entity Name PERINI LAND AND DEVELOPMENT COMPANY, INC.	
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Principal Place of Business 73 MT. WAYTE AVENUE FRAMINGHAM, MA 01710	Mailing Address 73 MT. WAYTE AVENUE FRAMINGHAM, MA 01710
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04232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0974333	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CT 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

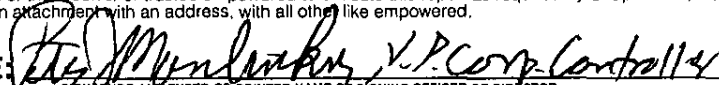
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000743949 05/15/07-80127-013 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP S GAUTHIER, CARL P 35 HAWTHORNE RD LEOMINSTER, MA 01453
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ORTEGA, ROSEMARY A 16 MARION ST UXBRIDGE, MA 01569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MELLACE, SUSAN C 23 DIRADO DRIVE MARLBOROUGH, MA 01752
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAND, ROBERT 19 WILLIAM J HEIGHTS FRAMINGHAM, MA 01701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  **4/24/07** **008-628-2576**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

PERINI CORP., PARENT