

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

**Jan 23, 2006 08:00 AM
Secretary of State**

DOCUMENT # F95000002400

1. Entity Name
ATC TOWER SERVICES, INC.



Principal Place of Business
**116 HUNTINGTON AVE
11TH FLOOR
BOSTON, MA 02116**

Mailing Address
**116 HUNTINGTON AVE
11TH FLOOR
BOSTON, MA 02116**



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 85-0313707	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	POEO TAICLET, JAMES D JR 116 HUNTINGTON AVE. BOSTON, MA 02116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HESS, WILLIAM 116 HUNTINGTON AVENUE BOSTON, MA 02116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFD SINGER, BRADLEY E 116 HUNTINGTON AVENUE BOSTON, MA 02116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS MILSOM, MICHAEL B 116 HUNTINGTON AVENUE BOSTON, MA 02116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11000001443014
01/28/06-80046-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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: Michael B. Milsom **Michael B. Milsom** 1/9/2006 617 375-7500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #