

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000000779

1. Entity Name

NMC MEDICAL SERVICES, INC.

**FILED**  
**May 10, 2000 8:00 am**  
**Secretary of State**

05-10-2000 90160 001 \*6,000.00

Principal Place of Business

Mailing Address

HAYDEN AVE  
TRAPELO ROAD  
MA 02173

95 HAYDEN AVE  
1601 TRAPELO ROAD  
LEXINGTON MA 02421-7942  
US

2. Principal Place of Business

95 HAYDEN AVE.

Suite, Apt. #, etc.

3. Mailing Address

95 HAYDEN AVE

Suite, Apt. #, etc.

City & State  
LEXINGTON MA

City & State  
LEXINGTON MA 02420

Zip  
02420

Country  
USA

Zip  
02420

Country  
USA

4. FEI Number  
25-1590355

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$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

7. Name and Address of New Registered Agent

Name

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME SWETT, GEOFFREY  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02173

TITLE S ☐ Delete  
NAME KEMBEL, DAVID A  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02173

TITLE D ☐ Delete  
NAME BEN LIPPS  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02173

TITLE T ☐ Delete  
NAME HEINZ SCHMIDT  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02173

TITLE AT ☐ Delete  
NAME JAMES V LUTHER  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02173

TITLE VP ☒ Delete  
NAME PATRICK MORIARTY  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02173

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP LEXINGTON MA 02420

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP LEXINGTON MA 02420

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP LEXINGTON MA 02420

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP LEXINGTON MA 02420

TITLE AT ☐ Change ☒ Addition  
NAME LIEBERMAN, MARC  
STREET ADDRESS 95 HAYDEN AVE  
CITY-ST-ZIP LEXINGTON MA 02420

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED MARC LIEBERMAN

Date

4-19-00 781-402-9000

Daytime Phone #

CR2E034 (9/99)

F96000000779

13083

**NMC MEDICAL SERVICES, INC.**

**LIST OF OFFICERS AND DIRECTORS**  
**EFFECTIVE 01/01/2000**

<b>DIRECTORS</b>	<b>OFFICE HELD</b>	<b>RESIDENCE</b>
BEN J. LIPPS	DIRECTOR	67 MARLBOROUGH ST., #3 BOSTON, MA 02116
<b>OFFICERS</b>	<b>OFFICE HELD</b>	<b>RESIDENCE</b>
HEINZ J. SCHMIDT	TREASURER	3108 PASEO GRANADA PLEASANTON, CA 94566
MARC S. LIEBERMAN	ASSISTANT TREASURER	10 CROWN POINT ROAD SUDBURY, MA 01776
JAMES V. LUTHER	ASSISTANT TREASURER	50 SUNNYSIDE AVENUE READING, MA 01867
DAVID A. KEMBEL	ASSISTANT SECRETARY	151 REED FARM ROAD BOXBOROUGH, MA 01719

*Corporate Headquarters*  
*95 Hayden Avenue*  
*Lexington, MA 02420*