

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001408

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: SAGER SALES CORPORATION

**Current Principal Place of Business:**

97 LIBBEY INDUSTRIAL PARKWAY  
WEYMOUTH, MA 02189

**New Principal Place of Business:**

**Current Mailing Address:**

97 LIBBEY INDUSTRIAL PARKWAY  
WEYMOUTH, MA 02189

**New Mailing Address:**

FEI Number: 04-3343151      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NORTON III, RAYMOND P  
Address: 382 FALMOUTH WOOD RD  
City-St-Zip: EAST FALMOUTH, MA 02536

Title: S ( ) Delete  
Name: DROHAN, DAVID  
Address: 6 KING PHILLIP PATH  
City-St-Zip: HINGHAM, MA 02046

Title: TP ( ) Delete  
Name: FLYNN, FRANCIS J  
Address: 73 FARRAR FARM RD  
City-St-Zip: NORWELL, MA 02061

Title: D ( ) Delete  
Name: NORTON, JONATHAN E  
Address: 27 BEL AIR RD  
City-St-Zip: HINGHAM, MA 02043

Title: D ( ) Delete  
Name: METTERS, JOHN R  
Address: 123 MORE RD  
City-St-Zip: WEYMOUTH, MA 02189

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JONATHAN E NORTON

D

04/26/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date