

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002718

FILED
Apr 26, 2005
Secretary of State

Entity Name: INVESTORS CAPITAL CORP. OF MASSACHUSETTS

Current Principal Place of Business:

799 OVERLOOK DRIVE
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

799 OVERLOOK DRIVE
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 04-3161577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAM, DON E
1502 DUNDEE ROAD
WINTER HAVEN, FL 338841012 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: P () Delete
Name: MURPHY, TIMOTHY B
Address: 21 MORELAND RD
City-St-Zip: QUINCY, MA 02169

Title: TD () Delete
Name: CHARLES, THEODORE E
Address: 65 EASTERN POINT BOULEVARD
City-St-Zip: GLOUCESTER, MA 01930

Title: V () Delete
Name: MCCRAINE, SUSAN A
Address: 230 BROADWAY
City-St-Zip: LYNNFIELD, MA 01940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MURPHY, TIMOTHY B
Address: 55 CHANTICLEER ROAD
City-St-Zip: SUDBURY, MA 01776 US

Title: TD (X) Change () Addition
Name: CHARLES, THEODORE E
Address: 65 EASTERN POINT BOULEVARD
City-St-Zip: GLOUCESTER, MA 01930 US

Title: V (X) Change () Addition
Name: MCCRAINE, SUSAN A
Address: 230 BROADWAY
City-St-Zip: LYNNFIELD, MA 01940 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TIMOTHY B. MURPHY

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date