

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002718

FILED
Apr 16, 2009
Secretary of State

Entity Name: INVESTORS CAPITAL CORP. OF MASSACHUSETTS

Current Principal Place of Business:

799 OVERLOOK DRIVE
WINTER HAVEN, FL 33883

New Principal Place of Business:

230 BROADWAY
LYNNFIELD, MA 01940

Current Mailing Address:

799 OVERLOOK DRIVE
WINTER HAVEN, FL 33883

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
799 OVERLOOK DRIVE
WINTER HAVEN, FL 33883 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: 55 CHANTICLEER ROAD
City-St-Zip: SUDBURY, MA 01776 US

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

Title: COO (X) Delete
Name: PRESEKENIS, STEVEN C
Address: 230 BROADWAY
City-St-Zip: LYNNFIELD, MA 01940 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: MURPHY, TIMOTHY B
Address: 230 BROADWAY
City-St-Zip: LYNNFIELD, MA 01940 US

Title: MGR (X) Change () Addition
Name: TARENTINO, MELISSA
Address: 230 BROADWAY
City-St-Zip: LYNNFIELD, MA 01940 US

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

I hereby certify that the information supplied with this filing does not qualify 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: MELISSA TARENTINO

MGR

04/16/2009

Electronic Signature of Signing Officer or Director

Date