**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jan 19, 2001 8:00 am Secretary of State DOCUMENT # F9700003511 SUMMIT SERVICES GROUP, INC. 01-19-2001 90078 021 \*\*\*150.00 Principal Place of Business Mailing Address ONE WASHINGTON STREET. STE 206 ONE WASHINGTON STREET. STE 206 WELLESLEY MA 02181-WELLESLEY MA Q2181 02481 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 04-3118342 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) . Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) PCTD ☐ Addition TITLE ☐ Delete TITLE Change CUZZUPOLI, JOSEPH NAME NAME wester, MA STREET ADDRESS 167 MARLBOROUGH STREET, UNIT 4 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOSTON MA** Addition TITLE ☐ Delete TITLE 226 Commonwealth Ave Boston, MA BULLOCK, JOSEPH NAME NAME STREET ADDRESS STREET ADDRESS 50 COMMONWEALTH AVE., APT 32 CITY-ST-ZIP CITY-ST-ZIP **BOSTON MA** ☐ Change ☐ Addition TITLE TITLE ☐ Delete HIXON, THOMAS NAME NAME STREET ADDRESS ONE WASHINGTON ST STE 206 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WELLESLEY MA 02481 ☐ Addition TITLE Delete TITLE Change PRITCHARD, STINTON NAME STREET ADDRESS STREET ADORESS ONE WASHINGTON ST STE 206 CITY-ST-ZIP CITY-ST-ZIP WELLESLEY MA 02481 ☐ Addition TITLE ☐ Delete ☐ Change NAME CHANG, BENJAMIN NAME STREET ADDRESS STREET ADDRESS ONE WASHINGTON ST STE 206 CITY-ST-ZIP CITY-ST-ZIP WELLESLEY MA 02481 Change Addition TITLE ☐ Delete

CITY-ST-ZIP

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.

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Lawrence Freni

3030 1 Wowlington St Suite 200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/DI

781-237-161V