

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004060

FILED
Apr 26, 2008
Secretary of State

Entity Name: BERKSHIRE-WESTWOOD GRAPHICS GROUP, INC.

Current Principal Place of Business:

20 HADLEY MILLS RD.
BOX 1399
HOLYOKE, MA 01041

New Principal Place of Business:

Current Mailing Address:

JILL A CROSBY
1391 MAIN STREET STE 610
SPRINGFIELD, MA 01103

New Mailing Address:

FEI Number: 04-2712345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODIER, RICHARD
5720 NORTH WEST 81ST TERRACE
TAMARAC, FL 33321 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: DTP () Delete
Name: SULLIVAN, MICHAEL J
Address: 43 PARK SLOPE
City-St-Zip: HOLYOKE, MA 01040

Title: D () Delete
Name: BEAULAC, ROBERT
Address: 246 PINE ORCHARD ROAD
City-St-Zip: BRANFORD, CT 06405

Title: D () Delete
Name: PLANTE, CRAIG E
Address: 19 NOLAN LANE
City-St-Zip: FEEDING HILLS, MA 01030

Title: S () Delete
Name: CROSBY, JILL A
Address: 465 PROSPECT AVENUE
City-St-Zip: WEST SPRINGFIELD, MA 01089

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:

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: JILL A CROSBY

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04/26/2008

Electronic Signature of Signing Officer or Director

_____ Date