## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97000005171

Entity Name: JAMIESON MANAGEMENT COMPANY, INC.

FILED Feb 15, 2012 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
627 MAIN ST. #1 WOBURN, MA 01801			
Current Mailing Address:		New Mailing Address:	
627 MAIN ST. #1 WOBURN, MA 01801			
FEI Number: 04-3378024	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
JAMIESON, ROBERT J 1111 N. GULFSTREAM / SARASOTA, FL 34236	AVE #18B US		
The above named entity s in the State of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATURE:			
Electron	ic Signature of Registered Age	ent	Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: JAMIESON, ROBERT J

Address: 1111 N. GULFSTREAM AVE #18B

City-St-Zip: SARASOTA, FL 34236

Title: TD

Name: JAMIESON, SUSAN E

Address: 1111 N. GULFSTREAM AVE # 18B

City-St-Zip: SARASOTA, FL 34236

Title:

Name: JAMIESON, PETER C Address: 5 COYNE DRIVE City-St-Zip: WOBURN, MA 01801

Title: [

Name: JAMIESON, DAVID S Address: 3 BURLINGTON ST. City-St-Zip: WOBURN, MA 01801

Title:

Name: JAMIESON, PAUL J Address: 207 TEMPLE ST.

City-St-Zip: WEST ROXBURY, MA 02132

Title: DC

Name: JAMIESON, SCOTT J Address: 4 HAMMOND WAY City-St-Zip: ANDOVER, MA 01810

I hereby 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 all other like empowered.

SIGNATURE: ROBERT JAMIESON PD 02/15/2012