

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000005639

FILED
Apr 30, 2003
Secretary of State

Entity Name: DTR ASSOCIATES, INC. OF MASSACHUSETTS

Current Principal Place of Business:

45 BARTLETT STREET
MARLBOROUGH, MA 01752

New Principal Place of Business:

Current Mailing Address:

951 BROKEN SOUND PARKWAY NW
195
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 04-3125668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, GAIL
951 BROKEN SOUND PARKWAY NW
195
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

GRIFFITHS, STACEY
951 BROKEN SOUND PARKWAY NW
195
BOCA RATON, FL 33487 US

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: STACEY GRIFFITHS

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: CTD () Delete
Name: GRILLO, VICTOR SR
Address: 951 BROKEN SOUND PKWY #195
City-St-Zip: BOCA RATON, FL 33487

Title: P () Delete
Name: WYSOCKI, RAYMOND J JR
Address: 45 BARTLETT STREET
City-St-Zip: MARLBOROUGH, MA 01752

Title: S () Delete
Name: GELLER, BETH M
Address: 951 BROKEN SOUND PKWY #195
City-St-Zip: BOCA RATON, FL 33487

Title: V () Delete
Name: MCCARTNEY, CHRISTINE
Address: 45 BARTLETT STREET
City-St-Zip: MARLBOROUGH, MA 01752

Title: V () Delete
Name: RYAN, CATHY
Address: 45 BARTLETT STREET
City-St-Zip: MARLBOROUGH, MA 01752

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: MOORE, GAIL A
Address: 951 BROKEN SOUND PKWY #195
City-St-Zip: BOCA RATON, FL 33487

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 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: VICTOR N GRILLO

CTD

04/30/2003

Electronic Signature of Signing Officer or Director

Date