


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # F98000005624	
1. Entity Name PERINI MANAGEMENT SERVICES, INC.	

Principal Place of Business 73 MOUNT WAYTE AVE. FRAMINGHAM, MA 01701-9160	Mailing Address 73 MOUNT WAYTE AVE. FRAMINGHAM, MA 01701-9160
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01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-2585210	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE
IN THIS SPACE**

6. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when certifying) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAND, ROBERT 19 WILLIAM J. HEIGHTS FRAMINGHAM, MA 01701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIZZO, RICHARD J 4732 ARROYA DRIVE PARADISE VALLEY, AZ 85253
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP WOODS, KEVIN J 20200 ST ANDREWS CT OLYMPIA FIELDS, IL 60461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASCD ORTEGA, ROSEMARY A 208 N MAIN ST. BELLINGHAM, MA 02019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MICHAEL, CISKEY E 2 RACEBROOK DR BETHEL, CT 06801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHAW, CRAIG W 13 E. OAKWOOD HILLS DR. CHANDLER, AZ 85248

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03/22/06 00004-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rosemary Ortega *Rosemary Ortega* 3/1/06 505-628-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #