

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 06, 2002 8:00 am**  
**Secretary of State**

06-06-2002 90084 035 \*\*\*550.00

**DOCUMENT # F98000006338**

1. Entity Name  
**D. MARTIN AND ASSOCIATES, INC.**

Principal Place of Business  
**1515 NORTH SANBORN BLVD.**  
**MITCHELL SD 57301-1021**

Mailing Address  
**1515 NORTH SANBORN BLVD.**  
**MITCHELL SD 57301-1021**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **46-0350212** Applied For Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>MARTIN, DOUGLAS F</b> <b>1515 NORTH SANBORN BLVD.</b> <b>MITCHELL SD 57301-1021</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEOD</b> <b>ODOM, JIM C</b> <b>1515 NORTH SANBORN BLVD.</b> <b>MITCHELL SD 57301-1021</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPS</b> <b>HERMAN, BRUCE D</b> <b>1515 NORTH SANBORN BLVD.</b> <b>MITCHELL SD 57301-1021</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>BARTELS, KEITH A</b> <b>1515 NORTH SANBORN BLVD.</b> <b>MITCHELL SD 57301-1021</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MOHAN, KEVIN P</b> <b>600 ATLANTIC AVENUE, SUITE 2800</b> <b>BOSTON MA 02110</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SCHICIANO, KENNETH T</b> <b>125 HIGH STREET, SUITE 2500</b> <b>BOSTON MA 02110</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<i>(see attached listing for additional Board Members)</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *STEVE DRE...* **STEVE DRE...** **REQUIRED** **5/24/2002** **605-996-9646**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

*Attachment*

MARTIN GROUP, INC.

#F98000006338

117111

Board Members:	* Peter J. Smith Chairman	One Devonshire Place, Unit 2209 Boston, MA 02109
	Jim C. Odom Chief Executive Officer	1515 North Sanborn Blvd. Mitchell, SD 57301-1021
	Kevin P. Mohan	600 Atlantic Avenue, Suite 2800 Boston, MA 02210
	Kenneth T. Schiciano	125 High Street, Suite 2500 Boston, MA 02110
	* Brian J. Conway	125 High Street, Suite 2500 Boston, MA 02110
	Douglas F. Martin President	1515 North Sanborn Blvd. Mitchell, SD 57301-1021
	* E. Van Cullens	237 Lansing Island Dr. Indian Harbour Beach, FL 32937

\* Not listed on preprinted form