

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005804

FILED  
Mar 04, 2011  
Secretary of State

**Entity Name:** BEACON APPLICATION SERVICES CORPORATION

**Current Principal Place of Business:**

959 CONCORD STREET  
SUITE 250  
FRAMINGHAM, MA 01701

**New Principal Place of Business:**

**Current Mailing Address:**

959 CONCORD STREET  
SUITE 250  
FRAMINGHAM, MA 01701

**New Mailing Address:**

**FEI Number:** 04-3097948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

NRAI SERVICES, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: KEVIN R. ROBERTS

03/04/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MAUDE, DANIEL P  
Address: 4 CERULEAN WAY  
City-St-Zip: LINCOLN, MA 01773

Title: CLKD  
Name: OSIT, MADELINE  
Address: 4 CERULEAN WAY  
City-St-Zip: LINCOLN, MA 01773

Title: T  
Name: MAUDE, DANIEL P  
Address: 4 CERULEAN WAY  
City-St-Zip: LINCOLN, MA 01773

Title: D  
Name: EDDY, DAVID  
Address: 42 TYLER TERRACE  
City-St-Zip: NEWTON CENTRE, MA 02159

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: MELANIE A. HAY

VP

03/04/2011

Electronic Signature of Signing Officer or Director

Date