## 2002 Uniform Business Report (UBR)

## Mar 13, 2002 8:00 am DOCUMENT # G41583 Secretary of State 1. Entity Name 03-13-2002 90115 033 \*\*\*150.00 WESTFOUR, INC. Principal Place of Business Mailing Address 284 NEWBURY ST 284 NEWBURY ST **BOSTON MA 02115** BOSTON MA 02115 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 04-2795814 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Addition CR2E034 (9/01 TITLE ☐ Delete TITLE SARKIS, CHARLES F. NAME NAMÉ 287 COMMONWEALTH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOSTON MA 02115** CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE HARTZFELD, MARK L NAME NAME STREET ADDRESS 777 BOYLSTON STREET STREET ADDRESS CITY-ST-ZIP **BOSTON MA 02116** CITY-ST-ZIP TITLE VSTD ☐ Delete TITLE ☐ Change Addition ·NAME----: BISSAILLON, FRANCIS P. NAME STREET ADDRESS 16 BEACH ROAD STREET ADDRESS CITY-ST-ZIP WEST FALMOUTH MA 02574 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE CIAMPA, ROBERT J NAME NAME STREET ADDRESS 35 TRAVIS RD STREET ADDRESS CITY-ST-ZIP NATICK MA CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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. Francis P. Bissqilla 2/13/02 6175362800 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

CITY-ST-ZIP

CITY-ST-ZIP

**FILED** 



#-G41583 42918

February 25, 2002

## VIA CERTIFIED MAIL

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Westfour, Inc.

Dear Sir or Madam:

On behalf of Westfour, Inc., enclosed please find a completed 2002 Uniform Business Report and also a check in the amount of \$150.00 in payment of the filing fee.

Please do not hesitate to contact me if you have any questions or concerns.

Sincerely,

Karin R. Eaton

Corporate Licensing Manager