

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P04212 (7)

1. Corporation Name

ADDITIONAL TECHNICAL SUPPORT, INC.



Principal Place of Business

1466 MAIN STREET  
WALTHAM MA 02254-6018

Mailing Address

1466 MAIN STREET  
WALTHAM MA 02254-6018

2. Principal Place of Business

21 1466 Main St.

Suite, Apt. #, etc.

22 City & State

23 Waltham MA

24 Zip 02154

Country

25 US

2a. Mailing Address

26 P O Box 9018

Suite, Apt. #, etc.

27 City & State

28 Waltham MA

29 Zip 02154

Country

30 US

3. Date Incorporated or Qualified

11/30/1984

3a. Date of Last Report

03/17/1995

4. FET Number

04-2638723

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, type or printed name of registered agent and then of filer(s).

(NOTE: Registered Agent's signature required when registering)

Date

12. OFFICERS AND DIRECTORS

TITLE CPD ☒ DELETE

NAME WHITE, JOSEPH R.  
STREET ADDRESS 1466 MAIN STREET  
CITY-ST-ZIP WALTHAM MA

TITLE D ☒ DELETE

NAME HACKETT, HOWARD A.  
STREET ADDRESS 164 WESTFORD RD.  
CITY-ST-ZIP TYNGSBOROUGH MA

TITLE S ☒ DELETE

NAME HUGHES, JAMES M.  
STREET ADDRESS 175 DERBY ST.  
CITY-ST-ZIP HINGHAM MA

TITLE V ☒ DELETE

NAME TINTLE, STEVEN J.  
STREET ADDRESS 1466 MAIN STREET  
CITY-ST-ZIP WALTHAM MA

TITLE T ☒ DELETE

NAME BANKS, EDWARD W  
STREET ADDRESS 1466 MAIN STREET  
CITY-ST-ZIP WALTHAM MA

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE President/Director ☒ Change ☐ Addition

12 NAME Derek E. Dewan  
13 STREET ADDRESS 6440 Atlantic Blvd.  
14 CITY-ST-ZIP Jacksonville, FL 32211

21 TITLE Vice-President ☒ Change ☐ Addition

22 NAME Robert E. Cecchini  
23 STREET ADDRESS 1466 Main St.  
24 CITY-ST-ZIP Waltham MA 02154

31 TITLE Treasurer/Clerk/Director ☒ Change ☐ Addition

32 NAME Stephan A. Hoffman  
33 STREET ADDRESS 6440 Atlantic Blvd.  
34 CITY-ST-ZIP Jacksonville FL 32211

41 TITLE ☐ Change ☐ Addition

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated in this annual report or supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE

*Robert E. Cecchini*

Robert E. Cecchini 3/27/96 (617)8935600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)