

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000107825

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** MOYLAN MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

136 HIGHVIEW ST.  
WESTWOOD, MA 02090

**New Principal Place of Business:**

**Current Mailing Address:**

136 HIGHVIEW ST.  
WESTWOOD, MA 02090

**New Mailing Address:**

**FEI Number:** 20-5409007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATHFINDER BUSINESS STRATEGIES LLC  
10315 102ND TERRACE  
SEBASTIAN, FL 32958 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DIRE  
**Name:** MCGOWAN, BILL  
**Address:** 80 COPELAND ST.  
**City-St-Zip:** QUINCY, MA 02169

**Title:** DIRE  
**Name:** MOYLAN, SHEILA  
**Address:** 136 HIGHVIEW ST.  
**City-St-Zip:** WESTWOOD, MA 02090

**Title:** PRES  
**Name:** MOYLAN, SHEILA  
**Address:** 136 HIGHVIEW ST.  
**City-St-Zip:** WESTWOOD, MA 02090

**Title:** TREA  
**Name:** MOYLAN, SHEILA  
**Address:** 136 HIGHVIEW ST.  
**City-St-Zip:** WESTWOOD, MA 02090

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:** SHEILA MOYLAN

MS

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date