2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07353

Entity Name: VERAVEST INVESTMENTS, INC.

FILED May 09, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	LN STREET ER, MA 01653	30001			
Current Mailing Address:			New Mailing Address:		
C/O CORP	LN STREET ORATE SECRI ER, MA 01653				
FEI Number: 04-2888068		FEI Number Applied For ()	El Number Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324				
The above in the State		ubmits this statement for the pur	pose of changing it	s registered office or registered agent, or both,	
SIGNATUR					
	Electronic	Signature of Registered Agent		Date	
Election Cam		(2)(b), F.S., the corporation did not re Trust Fund Contribution (). ORS:	•	e. S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ()[REARDON, MICH 15 BERTIS ADAM WESTBORO, MA	/IS WAY	Title: Name: Address: City-St-Zip:	P (X) Change () Addition TESTA, PAULA 440 LINCOLN ST WORCESTER, MA 01581	
Title: Name: Address: City-St-Zip:	D ()E HUBER, J. KEND 440 LINCOLN ST WORCESTER, M	REET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S ()[CRONIN, CHARL 57 LONGWOOD LUNENBURG, M	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AVP () [ALSTON, PHILIP 4 DUVAL ROAD DUDLEY, MA 01	G	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	AS () E ARMSTRONG, A 274 BROCKELM LANCASTER, MA	AN ROAD	Title: Name: Address: City-St-Zip:	AT (X) Change () Addition PARRY, EDWARD J III 440 LINCOLN ST WORCESTER, MA 01523	
Title: Name: Address: City-St-Zip:	T () E MCGIVNEY, MAF 440 LINCOLN ST WORCESTER, M	REET	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SANDRA F. KIMBALL CFO 05/09/2006