

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 8:00 am
Secretary of State

01-14-2008 90110 006 ***158.75

DOCUMENT # P14454

1. Entity Name
VANASSE HANGEN BRUSTLIN, INC.



Principal Place of Business
101 WALNUT ST.
P O BOX 9151
WATERTOWN, MA 02471

Mailing Address
101 WALNUT ST.
P O BOX 9151
WATERTOWN, MA 02471

40003771



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

04-2931679

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROSBY, DALE A
7804 WHITE ASH ST
ORLANDO, FL 32819

Name
Paul W. Yeargain

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

1628 Oviedo Grove Circle, #20

City Oviedo

FL

32065

32765

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Paul Yeargain

Paul Yeargain

1/10/08

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
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME O'CALLAGHAN, FRANCIS
STREET ADDRESS 81 WATERVALE RD
CITY-ST-ZIP MEDFORD, MA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME VOKES, ROBERT R
STREET ADDRESS 1 JUNIPER ST
CITY-ST-ZIP HUDSON, NH

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME FEINSTEIN, JONATHAN
STREET ADDRESS 38 CONSTITUTION DR
CITY-ST-ZIP SOUTHBORO, MA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME JACKSON, JOHN B
STREET ADDRESS 22 SCHOOL HOUSE LN
CITY-ST-ZIP HINGHAM, MA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME ROACHE, WILLIAM J.
STREET ADDRESS 38 GROVE STREET
CITY-ST-ZIP NORFOLK, MA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Paul Yeargain

TREASURER

Date

1/4/08

Daytime Phone #

617
924-1770