

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortman Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P21266 (2)
1. Corporation Name
NORMANDEAU ASSOCIATES, INC.



Principal Place of Business 25 NASHUA RD. BEDFORD NH 03110	Mailing Address 81 WYMAN ST. WALTHAM MA 02154-1223 US
--	---

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/12/1988		3a. Date of Last Report 05/01/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 02-0373462		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HALL, PAMELA S			1.2 NAME			
STREET ADDRESS	25 NASHUA ROAD			1.3 STREET ADDRESS			
CITY-ST-ZIP	BEDFORD NH 03110			1.4 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PAINTER, JONATHAN W			2.2 NAME			
STREET ADDRESS	81 WYMAN STREET			2.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			2.4 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KELLEHER, PAUL F			3.2 NAME			
STREET ADDRESS	81 WYMAN ST.			3.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			3.4 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AGHABABIAN, ROBERT V			4.2 NAME			
STREET ADDRESS	81 WYMAN ST.			4.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			4.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LAMBERT, SANDRA L			5.2 NAME			
STREET ADDRESS	81 WYMAN STREET			5.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			5.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SMITH, ARVIN H			6.2 NAME	D		
STREET ADDRESS	1300 ALEXANDRA COURT			6.3 STREET ADDRESS	JOHN P. APPLETON		
CITY-ST-ZIP	COLLEYVILLE TX 76034			6.4 CITY-ST-ZIP	81 WYMAN STREET WALTHAM, MA 02254		

14. I do 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 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 if changed, or by an attachment with an address.

SIGNATURE:  ASSISTANT SECRETARY 4/28/97 (617) 622-1000

CR2E034 (9/96)

**ADDITIONAL OFFICERS FOR
NORMANDEAU ASSOCIATES**

OFFICERS:

SENIOR VICE PRESIDENT:

ROBERT W. BLYE, JR. **25 NASHUA ROAD, BEDFORD, NH 03110**

VICE PRESIDENTS:

JAMES K. BARRETT	25 NASHUA ROAD, BEDFORD, NH 03110
GENE W. EDISON	102 SOUTH BOUNDARY AVE. AIDEN, SC 29809
PAUL L. HARMON	25 NASHUA ROAD, BEDFORD, NH 03110
PETER C. KINNER	25 NASHUA ROAD, BEDFORD, NH 03110
DENNIS W. MAGEE	25 NASHUA ROAD, BEDFORD, NH 03110
DILIP MATHUR	25 NASHUA ROAD, BEDFORD, NH 03110
MARK T. MATTSON	25 NASHUA ROAD, BEDFORD, NH 03110
JOHN W. SHIPMAN	25 NASHUA ROAD, BEDFORD, NH 03110
VIRGINIA T. TREWORGY	101 EAST GROVE STREET, MIDDLEBORO, MA

ASSISTANT SECRETARIES:

SETH H. HOOGASIAN **81 WYMAN STREET, WALTHAM, MA 02254**