


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P23800 1. Entity Name ROOTER-MAN CORP.	
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Principal Place of Business
268 RANGEWAY RD
N BILLERICA, MA 01862

Mailing Address
268 RANGEWAY RD
N BILLERICA, MA 01862



03042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-2750336	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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IN THIS SPACE**

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 _____
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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MACDONALD, VINCENT
STREET ADDRESS	268 RANGEWAY RD.
CITY-ST-ZIP	NO. BILLERICA, MA 01862
TITLE	CL
NAME	MACDONALD, CHARLENE
STREET ADDRESS	268 RANGEWAY RD.
CITY-ST-ZIP	NO. BILLERICA, MA 01862
TITLE	TD
NAME	MACDONALD, CHARLENE
STREET ADDRESS	268 RANGEWAY RD.
CITY-ST-ZIP	NO. BILLERICA, MA 01862
TITLE	D
NAME	MACDONALD, VINCENT
STREET ADDRESS	268 RANGEWAY RD.
CITY-ST-ZIP	NO. BILLERICA, MA 01862
TITLE	D
NAME	MACDONALD, CHARLENE
STREET ADDRESS	268 RANGEWAY RD.
CITY-ST-ZIP	NO. BILLERICA, MA 01862
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/27/07-80034-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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: Vincent MacDonald President 3/12/07 978-667-1144
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #