

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P33869

1. Entity Name  
**FORWARD FINANCIAL COMPANY**

**FILED**  
**Mar 06, 2001 8:00 am**  
**Secretary of State**

03-06-2001 90011 032 \*\*\*150.00

Principal Place of Business  
**360 CHURCH ST.,  
NORTHBORO MA 01532**

Mailing Address  
**360 CHURCH ST.,  
NORTHBORO MA 01532**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **04-2590778**

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

**MURPHY, RONALD T  
4740 CLEVELAND HEIGHTS BLVD.,  
LAKELAND FL 33813**

Name

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

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HOLLAND, DAVID F</b> <b>360 CHURCH STREET</b> <b>NORTHBORO MA 01532</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DEFEUDIS, GENE J.</b> <b>63 CHERRY ST.</b> <b>NORTHBORO MA</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MCGEE, SHAUN W</b> <b>31 WACHUSETT VIEW DRIVE</b> <b>WESTBORO MA 01581</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VS</b> <b>MULLEN, JOHN D.</b> <b>208 MAIN STREET</b> <b>MEDWAY MA</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DC</b> <b>CONLEY, DAVID P</b> <b>360 CHURCH STREET</b> <b>NORTHBORO MA</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT</b> <b>SIMAS, JOHN A</b> <b>360 CHURCH STREET</b> <b>NORTHBORO MA</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

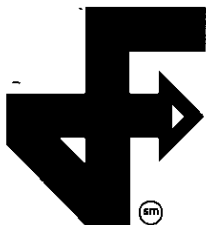
SIGNATURE:

**John D. Mullen**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-28-01**  
Date

**508-393-5300**  
Daytime Phone #

CR2E034 (10/00)



# FORWARD FINANCIAL COMPANY

360 Church Street • Northboro, Massachusetts 01532 • (508) 393-5300

Web Site> <http://www.forwardfinancial.com>

attachment  
# P33869

March 1, 2001

Division of Corporations  
Uniform Business Report Filing  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: 2001 Uniform Business Report  
Document # P33869

Ladies and Gentlemen:

Enclosed please find our completed and signed 2001 Uniform Business Report together with our check in the amount of \$150.00 payable to Department of State to cover our filing fee.

Kindly contact me if you have questions.

Very truly yours,

John D. Mullen  
Senior Vice President

enclosure

jdm.132