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Feb 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morand
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35916

(6)

1. Corporation Name

METHODS MACHINE TOOLS, INC.

Principal Place of Business

Mailing Address

65 UNION AVE.
SUDBURY MA 01776

65 UNION AVE.
SUDBURY MA 01776-2245



3. Date Incorporated or Qualified

10/11/1991

3a. Date of Last Report

02/16/1996

4. FEI Number

04-2254513

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CHADIN, ROBERT JR
105 MITCHELL DRIVE
BRANDON FL 32810

10. Name and Address of New Registered Agent

81 Name

Michael Narus

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

1021 LOVE STREET

83

84 City

JUPITER

FL

85 Zip Code

33497

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

02/04/97

12. OFFICERS AND DIRECTORS

TITLE CDP ☐ DELETE

NAME MCIVER, CLEMENT, JR.

STREET ADDRESS 150 DAKIN RD.

CITY - ST - ZIP SUDBURY MA

TITLE VD ☐ DELETE

NAME WHIPPEN, WAYNE K.

STREET ADDRESS 35 FIELD RD.

CITY - ST - ZIP SUDBURY MA

TITLE S ☐ DELETE

NAME GEORGE, PAUL

STREET ADDRESS 20 WILLIAM ST.

CITY - ST - ZIP WELLESLEY MA

TITLE TD ☐ DELETE

NAME DEYSHER, BRYON G.

STREET ADDRESS 28 GUZZLEBROOK DR.

CITY - ST - ZIP SUDBURY MA

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/97

508-443-5288

CR2E034 (9/96)