

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36292

FILED
May 01, 2006
Secretary of State

Entity Name: THE RETEC GROUP, INC.

Current Principal Place of Business:

300 BAKER AVE
SUITE 302
CONCORD, MA 01742

New Principal Place of Business:

Current Mailing Address:

300 BAKER AVE
SUITE 302
CONCORD, MA 01742

New Mailing Address:

FEI Number: 04-2896814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KNUPP, MICHAEL
Address: 300 BAKER AVE
City-St-Zip: CONCORD, MA 01742

Title: VCOO () Delete
Name: GENES, BENJAMIN
Address: 300 BAKER AVE
City-St-Zip: CONCORD, MA 01742

Title: S () Delete
Name: ZIMMER, THOMAS M
Address: 245 WINTER ST., SUITE 400
City-St-Zip: WALTHAM, MA 02451

Title: TCFO () Delete
Name: DONOVAN, DANIEL C III
Address: 300 BAKER AVE
City-St-Zip: CONCORD, MA 01742

Title: DAS () Delete
Name: LITTAS, COSTA
Address: 890 WINTER ST., SUITE 130
City-St-Zip: WALTHAM, MA 02451

Title: D () Delete
Name: MAJERNIK, CRAIG
Address: 890 WINTER ST., SUITE 400
City-St-Zip: WALTHAM, MA 02451

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CAO (X) Change () Addition
Name: KNUPP, MICHAEL
Address: 300 BAKER AVE
City-St-Zip: CONCORD, MA 01742

Title: DCEO (X) Change () Addition
Name: GENES, BENJAMIN
Address: 300 BAKER AVE
City-St-Zip: CONCORD, MA 01742

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL D. KNUPP

CAO

05/01/2006

Electronic Signature of Signing Officer or Director

Date