

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2006 8:00 am
Secretary of State

02-23-2006 90002 041 ***150.00

60021284



02102006 Chg-P CR2E034 (11/05)

4. FEI Number **04-2193872** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	JONES, BRIAN S	
STREET ADDRESS	101 UNION STREET	
CITY - ST - ZIP	CLINTON, MA 01510	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIPP, FRANK J.	
STREET ADDRESS	36 TRAILS END ROAD	
CITY - ST - ZIP	WILTON, CT	
TITLE	SV	<input type="checkbox"/> Delete
NAME	PECK, JAMES W	
STREET ADDRESS	101 UNION STREET	
CITY - ST - ZIP	CLINTON, MA 01510	
TITLE	DTVP	<input type="checkbox"/> Delete
NAME	LAPRES, THEODORE E III	
STREET ADDRESS	101 UNION STREET	
CITY - ST - ZIP	CLINTON, MA 01510	
TITLE	D	<input type="checkbox"/> Delete
NAME	FLOWERS, WOODIE C	
STREET ADDRESS	214 BOSTON POST RD	
CITY - ST - ZIP	WESTON, MA 02193	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Theodore E Lapres III	
STREET ADDRESS	101 Union St	
CITY - ST - ZIP	Clinton MA 01510	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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:

[Signature] *James W Peck* *2/13/06* *9783659721*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Nyro Inc.

101 Union Street
Clinton, Massachusetts 01510
Telephone 978 365 9721
Fax 978 365 4352

ATTACHMENT

60021284

VIA OVERNIGHT MAIL

February 21, 2006

Florida Department of State
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

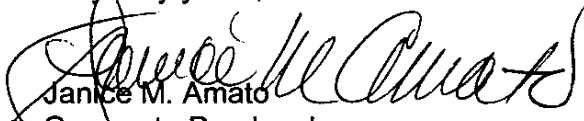
Re: Nyro Inc. - # P36466
FEIN: 04-2193872
2006 For Profit Annual Report

Ladies and Gentlemen:

Enclosed for filing please find the 2005 Annual Report for Nyro Inc. and a filing fee of \$150.00. Please date stamp the attached copy of this letter as receipt of evidence and return it to me in the enclosed envelope.

Should you have any questions or concerns, please contact me at 978 365 8494 or at janice.amato@nyro.com. Thank you.

Very truly yours,


Janice M. Amato
Corporate Paralegal