

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P36491

1. Entity Name

NMC SERVICES, INC.

**FILED**  
**May 10, 2000 8:00 am**  
**Secretary of State**

05-10-2000 90160 001 \*6,000.00

Principal Place of Business

Mailing Address

95 HAYDEN AVE  
LEXINGTON MA 02420  
US

95 HAYDEN AVE  
LEXINGTON MA 02421-7942  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-3136699

Applied For

Not Applicable

Zip

Country

Zip

Country

02420

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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, 2000 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  
AT  
LIEBERMAN, MARC  
95 HAYDEN AVE  
LEXINGTON MA 02420 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
JAMES V LUTHER  
95 HAYDEN AVE  
LEXINGTON MA 02420 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
LIPPS, BEN  
95 HAYDEN AVE  
LEXINGTON MA 02420 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
YI, RAMON  
95 HAYDEN AVE  
LEXINGTON MA 02420 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
KOTT, DOUGLAS  
95 HAYDEN AVE  
LEXINGTON MA 02420 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ 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:

**SIGNATURE REQUIRED** MARC LIEBERMAN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-00

Date

781-402-9000

Daytime Phone #

CR2E034 (9/99)

P36491  
13084

**NMC SERVICES, INC.**

**LIST OF OFFICERS AND DIRECTORS  
EFFECTIVE 01/01/2000**

<b>DIRECTORS</b>	<b>OFFICE HELD</b>	<b>RESIDENCE</b>
BEN J. LIPPS	DIRECTOR	67 MARLBOROUGH STREET, UNIT 3 BOSTON, MA 02116
<b>OFFICERS</b>	<b>OFFICE HELD</b>	<b>RESIDENCE</b>
BEN LIPPS	PRESIDENT	67 MARLBOROUGH STREET, UNIT 3 BOSTON, MA 02116
RAMON YI	TREASURER	30 FAITH DRIVE DERRY, NH 03038
MARC S. LIEBERMAN	ASSISTANT TREASURER	10 CROWN POINT ROAD SUDBURY, MA 01776
JAMES V. LUTHER	ASSISTANT TREASURER	50 SUNNYSIDE AVENUE READING, MA 01867
DOUGLAS G. KOTT	ASSISTANT SECRETARY	97 GLEN STREET S. NATICK, MA 01760

**CORPORATE HEADQUARTERS:**  
*2 Ledgemont Center  
95 Hayden Avenue  
Lexington, MA 02420  
Tele: 781-402-9000*