

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 MAR 30 AM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P36491

1. Entity Name
NMC SERVICES, INC.

Principal Place of Business

95 HAYDEN AVE
LEXINGTON, MA 02420 US

Mailing Address

ATTN: TAX DEPT., 95 HAYDEN AVE
LEXINGTON, MA 02420 US



03152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3136699

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	AT
NAME	LIEBERMAN, MARC
STREET ADDRESS	95 HAYDEN AVE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	AT
NAME	COLANTONIO, PAUL
STREET ADDRESS	95 HAYDEN AVE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	DP
NAME	LIPPS, BEN
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	T
NAME	FAWCETT, MARK
STREET ADDRESS	95 HAYDEN AVE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	S
NAME	KUERBITZ, RONALD J
STREET ADDRESS	95 HAYDEN AVE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	AS
NAME	KOTT, DOUGLAS G
STREET ADDRESS	95 HAYDEN AVE
CITY-ST-ZIP	LEXINGTON, MA 02420

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03/31/04--01004--001 **3250.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/04

Date

Daytime Phone #

(781) 402 9000

Attachment

P36491

NMC SERVICES, INC.

FEIN 04-3136699

**LIST OF OFFICERS AND DIRECTORS
EFFECTIVE 03/17/03**

DIRECTORS	OFFICE	BUSINESS
BEN J. LIPPS	DIRECTOR	95 HAYDEN AVENUE LEXINGTON, MA 02420
OFFICERS	OFFICE	BUSINESS
BEN LIPPS	PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARK FAWCETT	TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
PAUL J. COLANTONIO	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARC S. LIEBERMAN	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
RONALD J. KUERBITZ	SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420
DOUGLAS G. KOTT	ASSISTANT SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420