

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P37951 (1)

1. Corporation Name

PROMPT FINANCE INCORPORATED



Principal Place of Business

**PROMPT FINANCE INC
30 MONUMENT SQ
CONCORD MA 01742
US**

Mailing Address

**30 MONUMENT SQUARE
CONCORD MA 01742**

2. Principal Place of Business

21 **30 Monument Square**

Suite, Apt. #, etc.

22 **Suite 300**

City & State

23 **Concord, MA**

Zip

24 **01742**

Country

25 **USA**

2a. Mailing Address

26 **P.O. Box 9119**

Suite, Apt. #, etc.

27

City & State

28 **Concord, MA**

Zip

29 **01742**

Country

30 **USA**

3. Date Incorporated or Qualified
03/10/1992

3a. Date of Last Report
04/27/1995

4. FEI Number

04-2990210

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

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0606, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of individual or corporate name)

(Date, Registered Agent's signature or printed name)

(Date)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**DVP
WILLINGHAM, LESLIE W.
21 FAIRGROUNDS RD.
GROTON MA**

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**DP
WICKFIELD, ERIC N.
21 FAIRGROUNDS RD.
GROTON MA**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
STONE, PETER J.
68 ENNERDALE RD.
RICHMOND, ENGLAND**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
KENT, RODERICK D.
WOLVERTON COTTAGE
BASINGSALE, ENGLAND**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**S
BOURDRO, MICHELLE L
40 SPRUCE ST
ACTON MA**

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**T
WILLINGHAM, LESLIE W.
21 FAIRGROUNDS RD.
GROTON MA**

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

**D,VP,T
SUSAN E. CALLAHAN
5 PENNSYLVANIA AVENUE
CHELMSFORD, MA 01824**

☐ Change ☒ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

**D,P
ERIC N. WICKFIELD
21 JENKINS ROAD
GROTON, MA 01450**

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

**S
JEANNIE M. HINDY
1A MARION STREET EXTENSION
WILMINGTON, MA 01887**

☐ Change ☒ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(f), 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 if changed, or on an attachment with an address.

SIGNATURE:

Susan Callahan

SUSAN CALLAHAN

4-10-96

508-369-4700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Date Phone #

CR2E034 (12/95)