2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004
Secretary of State

DOCUMENT# P38204

Entity Name: CANTELLA & CO., INC.

Current Principal Place of Business:

2 OLIVER STREET
11TH FL
BOSTON, MA 02109

New Principal Place of Business:

Current Mailing Address:

2 OLIVER STREET
11TH FL
BOSTON, MA 02109

New Mailing Address:

FEI Number: 04-2670968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROWELL, PETER F
2074 CENTRE POINTE BLVD
SUITE 100
TALLAHASSEE, FL 32308 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CANTELLA, DAVID
Address: 12 TENNESSEE AVE
City-St-Zip: NANTUCKET, MA 02554

Title: NSM ( ) Delete
Name: FREEMAN, JAMES M
Address: 109 PROSPECT ST
City-St-Zip: NEWBURYPORT, MA 01950

Title: PD ( ) Delete
Name: PHILIP, MCMORROW
Address: 18 CLEMENTI LANE
City-St-Zip: METHUEN, MA 01844

Title: C ( ) Delete
Name: CANTELLA, VINCENT
Address: 635 LEWIS WHARF
City-St-Zip: BOSTON, MA 02110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: PHILIP MCMORROW PD 01/20/2004

Electronic Signature of Signing Officer or Director — Date