

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38204

Entity Name: CANTELLA & CO., INC.

FILED
Feb 27, 2007
Secretary of State

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
3848 KILLEARN CT.
TALLAHASSEE, FL 32309 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 (X) Delete
Name: CANTELLA, DAVID
Address: 12 TENNESSEE AVE
City-St-Zip: NANTUCKET, MA 02554

Title: NSM (X) Delete
Name: FREEMAN, JAMES M
Address: 1A STONEROW LN
City-St-Zip: GEORGETOWN, MA 01833

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

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

Title: TR () Delete
Name: GARVEY, JOHN
Address: 18 PARKWAY RD
City-St-Zip: MEDFORD, MA 02155

Title: CLRK () Delete
Name: SOMERS, JEFFREY
Address: 93 SOUTH ST.
City-St-Zip: NEEDHAM, MA 02192

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:

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 Chapter 119, 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

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02/27/2007

Electronic Signature of Signing Officer or Director

Date