

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104209

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: LEPANTO REALTY CORP.

**Current Principal Place of Business:**

405 COCHITUATE RD  
SUITE 203  
FRAMINGHAM, MA 01701

**New Principal Place of Business:**

**Current Mailing Address:**

405 COCHITUATE RD  
SUITE 203  
FRAMINGHAM, MA 01701

**New Mailing Address:**

FEI Number: 04-3345702      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: TS ( ) Delete  
Name: OAKLEY, JOHN  
Address: 18 PLANTATION ROAD  
City-St-Zip: MANSFIELD, MA 02048

Title: D ( ) Delete  
Name: DEMATTEO, MARTIN J JR  
Address: 84 COUNTRYSIDE LANE  
City-St-Zip: MILTON, MA 02186

Title: PD ( ) Delete  
Name: DEMATTEO, JOHN II  
Address: 30 ALBION RD  
City-St-Zip: WELLESLEY, MA 02481

Title: D ( ) Delete  
Name: DEMATTEO, MARTIN J  
Address: 14 MARR CREST DRIVE  
City-St-Zip: MILTON, MA 02186

**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 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: JOHN DEMATTEO II

PD

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date