

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832457

Entity Name: SASAKI ASSOCIATES, INC.**Current Principal Place of Business:**64 PLEASANT STREET
WATERTOWN, MA 02472**Current Mailing Address:**64 PLEASANT ST.
WATERTOWN, MA 02472 US**FEI Number:** 04-2230445**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US*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**Officer/Director Detail :**

Title	DP
Name	SUKEFORTH, JAMES A
Address	7 APPLETON TERRACE
City-State-Zip:	CAMBRIDGE MA 02138

Title	VP
Name	PIEPRZ, DENNIS
Address	30 UNION PARK STREET, UNIT #303
City-State-Zip:	BOSTON MA 02118

Title	TVP, CFO, SECRETARY
Name	ROSCOE, STEVEN M
Address	67 MEETINGHOUSE ROAD
City-State-Zip:	NORFOLK MA 02056

Title	DVP
Name	SUMNER FISKE, CROWELL
Address	8 WALTHAM ROAD
City-State-Zip:	WALTHAM MA 01778

Title	D
Name	VINICIUS, GORGATI J
Address	16 DARTMOUTH PLACE
City-State-Zip:	BOSTON MA 02116

Title	D, VP
Name	HAMWEY, STEPHEN E
Address	32 PALL MALL
City-State-Zip:	WALPOLE MA 02032

Title	VP, DIRECTOR
Name	IRWIN, BRYAN
Address	483 FRANKLIN STREET
City-State-Zip:	READING MA 01867

Title	DIRECTOR, VP
Name	MASSEY, WILLIAM
Address	14 WORTHINGTON STREET
City-State-Zip:	ROXBURY MA 02120

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I hereby 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 all other like empowered.

SIGNATURE: STEVEN M. ROSCOEVICE
PRESIDENT/SECRETARY

04/25/2013

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR, VP
Name	GORGATI, VINICIUS
Address	16 DARTMOUTH PLACE
City-State-Zip:	BOSTON MA 02116