

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004703

Entity Name: SHEPLEY BULFINCH RICHARDSON AND ABBOTT
INCORPORATED**FILED**
Mar 10, 2025
Secretary of State
5984331991CC**Current Principal Place of Business:**99 CHAUNCY STREET
4TH FLOOR
BOSTON, MA 02111**Current Mailing Address:**99 CHAUNCY STREET
4TH FLOOR
BOSTON, MA 02111 US**FEI Number: 04-2504672****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
2894 REMINGTON GREEN LANE
SUITE A
TALLAHASSEE, FL 32308 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 DIRECTOR
Name ALIBER, JENNIFER
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title DIRECTOR
Name CARGILL, VIRGINIA
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title DIRECTOR
Name GABEL, ROBERT
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title DIRECTOR
Name GIFFORD, MATTHEW
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title EXECUTIVE VP
Name HERZOG, JOSEPH
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title TREASURER
Name POST, KIMBERLY
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title DIRECTOR
Name QUINN, LUCIA
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

Title DIRECTOR
Name RAINEY, ALISON
Address 99 CHAUNCY STREET
4TH FLOOR
City-State-Zip: BOSTON MA 02111

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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: ANGELA WATSON**PRESIDENT****03/10/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	EXECUTIVE VP	Title	PRESIDENT, CHAIRMAN
Name	VOILAND, LUKE	Name	WATSON, ANGELA
Address	99 CHAUNCY STREET 4TH FLOOR	Address	99 CHAUNCY STREET 4TH FLOOR
City-State-Zip:	BOSTON MA 02111	City-State-Zip:	BOSTON MA 02111
Title	SECRETARY		
Name	ZAGARELLA, JENNIFER		
Address	99 CHAUNCY STREET 4TH FLOOR		
City-State-Zip:	BOSTON MA 02111		