2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2015
Secretary of State
CC6543910086

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Entity Name: A.W. CHESTERTON COMPANY

Current Principal Place of Business:

500 UNICORN PARK DRIVE
WOBURN, MA 01801

Current Mailing Address:

500 UNICORN PARK DRIVE
WOBURN, MA 01801

FEI Number: 04-1173400

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT
Name	O'DONNELL, BRIAN R
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	VP
Name	MAGUIRE, LEO D.
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	DIRECTOR
Name	CARROLL, JOHN
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	DIRECTOR
Name	O'DONNELL, BRIAN R
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	SECRETARY
Name	BENIK, TINA
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	TREASURER
Name	BAIRD, MARY JANET
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	DIRECTOR
Name	BLASBERG, ARTHUR JR.
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	DIRECTOR
Name	HOYLE, RICHARD F
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

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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: LEO D. MAGUIRE VP 03/26/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HAYES, DAVID W
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801

Title	DIRECTOR
Name	CHESTERTON, ANDREW
Address	500 UNICORN PARK DRIVE
City-State-Zip:	WOBURN MA 01801