

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002285

Entity Name: ASPEN SQUARE MANAGEMENT, INC.

Current Principal Place of Business:

380 UNION STREET, SUITE 300
WEST SPRINGFIELD, MA 01089

Current Mailing Address:

380 UNION STREET, SUITE 300
WEST SPRINGFIELD, MA 01089

FEI Number: 04-2672343

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 P
Name ANTHONY, FRED
Address 380 UNION STREET, SUITE 300
City-State-Zip: WEST SPRINGFIELD MA 01089

Title VP
Name MNICH, JOHN
Address 380 UNION STREET, SUITE 300
City-State-Zip: WEST SPRINGFIELD MA 01089

Title TS
Name PAVA, JEREMY
Address 380 UNION STREET, SUITE 300
City-State-Zip: WEST SPRINGFIELD MA 01089

Title AVPS
Name STROLE, JEFFREY M
Address 380 UNION STREET, SUITE 300
City-State-Zip: WEST SPRINGFIELD MA 01089

Title AVPT
Name HARRELSON, JOHN
Address 380 UNION STREET, SUITE 300
City-State-Zip: WEST SPRINGFIELD MA 01089

Title AS
Name HARRELSON, JOHN
Address 380 UNION STREET, SUITE 300
City-State-Zip: WEST SPRINGFIELD MA 01089

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: JOHN HARRELSON

CONTROLLER

03/30/2018

Electronic Signature of Signing Officer/Director Detail

Date