

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000001227

**Entity Name:** BOSTON ACADEMIC PUBLISHING, INC.

**Current Principal Place of Business:**

292 NEWBURY STREET  
SUITE 282  
BOSTON, MA 02115

**FILED**  
**Feb 12, 2024**  
**Secretary of State**  
**9124540116CC**

**Current Mailing Address:**

292 NEWBURY STREET  
SUITE 282  
BOSTON, MA 02115 US

**FEI Number: 81-3206627**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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, DIRECTOR, VP  
Name            EIELSON, JOHN  
Address        292 NEWBURY STREET  
                  SUITE 282  
City-State-Zip: BOSTON MA 02115

Title            DIRECTOR  
Name            ADAM, ALASTAIR  
Address        292 NEWBURY STREET  
                  SUITE 282  
City-State-Zip: BOSTON MA 02115

Title            TREASURER, SECRETARY  
Name            FLOROS, SHERRI  
Address        292 NEWBURY STREET  
                  SUITE 282  
City-State-Zip: BOSTON MA 02115

*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: SHERRI FLOROS**

**SECRETARY**

**02/12/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date