

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21266

**Entity Name:** NORMANDEAU ASSOCIATES, INC.**Current Principal Place of Business:**25 NASHUA ROAD  
BEDFORD, NH 03110**Current Mailing Address:**25 NASHUA ROAD  
BEDFORD, NH 03110**FEI Number:** 02-0373462**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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            PRESIDENT, DIRECTOR  
Name            HALL, PAMELA S  
Address        25 NASHUA ROAD  
City-State-Zip: BEDFORD NH 03110

Title            DIRECTOR  
Name            LEVIN, ELIZABETH K  
Address        342 BUNKER HILL STREET, 5A  
City-State-Zip: CHARLESTOWN MA 02129

Title            SECRETARY, TREASURER  
Name            SANBORN, SUSAN M  
Address        25 NASHUA ROAD  
City-State-Zip: BEDFORD NH 03110

Title            DIRECTOR  
Name            STICKNEY, KEVIN  
Address        7 LAMINGTON HILL ROAD  
City-State-Zip: STRATHAM NH 03885

Title            VP  
Name            THALKEN, CURTIS L  
Address        25 NASHUA ROAD  
City-State-Zip: BEDFORD NH 03110

Title            DIRECTOR  
Name            KINNER, PETER C  
Address        25 NASHUA ROAD  
City-State-Zip: BEDFORD NH 03110

Title            DIRECTOR, VP  
Name            BLYE, ROBERT  
Address        400 OLD READING PIKE  
City-State-Zip: STOWE PA 19464

Title            SENIOR VICE PRESIDENT, DIRECTOR  
Name            VARNEY, ROBERT W  
Address        25 NASHUA ROAD  
City-State-Zip: BEDFORD NH 03110

*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: SUSAN M. SANBORN****SECRETARY****04/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date