

The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Boston, Massachusetts 02108-1512

Annual Report for Domestic and Foreign Corporations

FORM MUST BE TYPED

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(General Laws Chapter 156D Section 16.22; 950 CMR 133.56)

(1) The exact name of the corporation is _____.

(2) The corporation is organized under the laws of _____.

(3) The street address of the corporation's registered office in the commonwealth is:

(number, street, city or town, state, zip code)

(4) The name of the registered agent at the registered office is _____.

(5) The street address of the corporation's principal office is:

(number, street, city or town, state, zip code)

(6) Provide the name and business addresses of the corporation's board of directors and its president, treasurer and secretary, and if different, its chief executive officer and chief financial officer.

NAME

ADDRESS

President: _____

Treasurer: _____

Secretary: _____

Chief Executive Officer: _____

Chief Financial Officer: _____

Directors: _____

(7) Briefly describe the business of the corporation:

(8-9) The capital stock of each class and series

Table with 3 columns: CLASS OF STOCK, TOTAL AUTHORIZED BY ARTICLES OF ORGANIZATION OR AMENDMENTS, TOTAL ISSUED AND OUTSTANDING. Rows include COMMON and PREFERRED.

(10) Check if the stock of the corporation is publicly traded. []

(11) Date of the fiscal year end is _____.

(month, day, year)

Signed by _____,

(signature of authorized individual)

(Please check appropriate box)

[] Chairman of the Board of Directors

[] Incorporator

[] Other Officer

[] Court Appointed Fiduciary

on this _____ day of _____ of _____.