

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004667

FILED  
Jan 06, 2006  
Secretary of State

Entity Name: CYTERRA CORPORATION

**Current Principal Place of Business:**

85 FIRST AVENUE  
WALTHAM, MA 02451

**New Principal Place of Business:**

**Current Mailing Address:**

85 FIRST AVENUE  
WALTHAM, MA 02451

**New Mailing Address:**

FEI Number: 04-3496006      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: FINE, DAVID H  
Address: 85 FIRST AVENUE  
City-St-Zip: WALTHAM, MA 02451

Title: C ( ) Delete  
Name: O'BRIEN, JAMES W  
Address: 16 FULLING MILL LANE  
City-St-Zip: HINGHAM, MA 02043

Title: CS ( ) Delete  
Name: FLANNERY, WILLIAM O  
Address: 722 GROVE STREET  
City-St-Zip: FRAMINGHAM, MA 01701

Title: D ( ) Delete  
Name: SHULMAN, STEVE  
Address: PO BOX 52  
City-St-Zip: RYE, NH 03871

Title: D ( ) Delete  
Name: LEVINE, RICHARD  
Address: 1608 SPRING HILL DRIVE, SUITE 300  
City-St-Zip: VIENNA, VA 22181

Title: V ( ) Delete  
Name: STEINWAY, WILLIAM  
Address: 85 FIRST AVENUE  
City-St-Zip: WALTHAM, MA 02451

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES R. HARDING

VP

01/06/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date