## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002823

Entity Name: WESTON & SAMPSON, INC.

**Current Principal Place of Business:** 

5 CENTENNIAL DRIVE PEABODY, MA 01960

**Current Mailing Address:** 

**5 CENTENNIAL DRIVE** PEABODY, MA 01960 US

FEI Number: 20-1998367 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

**FILED** May 02, 2016

**Secretary of State** 

CC8623151495

Officer/Director Detail :

Title PRESIDENT/ CHIEF EXECUTIVE

**OFFICER** 

SCIPIONE, MICHAEL J Name **5 CENTENNIAL DRIVE** Address

City-State-Zip: PEABODY MA 01960

Title

SCIPIONE, MICHAEL J Name **5 CENTENNIAL DRIVE** Address

City-State-Zip: PEABODY MA 01960

Title D

Name SCIPIONE, MICHAEL J Address **5 CENTENNIAL DRIVE** 

City-State-Zip: PEABODY MA 01960

Title D

Name MASTROCOLA, RICHARD E Address **5 CENTENNIAL DRIVE** 

City-State-Zip: PEABODY MA 01960

Title

GOOBER, ROBERT A Name **5 CENTENNIAL DRIVE** Address City-State-Zip: PEABODY MA 01960

Title S

Name GOOBER, ROBERT A Address **5 CENTENNIAL DRIVE** PEABODY MA 01960

City-State-Zip:

Title

Name BOCCHINO, JR., JOHN A Address **5 CENTENNIAL DRIVE** City-State-Zip: PEABODY MA 01960

Title DIRECTOR/ASSISTANT TREASURER

Name COOK, BARBARA K **5 CENTENNIAL DRIVE** Address City-State-Zip: PEABODY MA 01960

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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: MICHAEL SCIPIONE

DIRECTOR

05/02/2016

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Name

**DIRECTOR & ASSISTANT CLERK** Title D Title

Name RICCIARDI, FRANCIS M Name WESTER, CHRISTOPHER B

**5 CENTENNIAL DRIVE** Address 273 DIVIDEND RD Address ROCKY HILL CT 06067 City-State-Zip: City-State-Zip: PEABODY MA 01960

Title PRESIDENT/ CHIEF EXECUTIVE Title DIRECTOR

**OFFICER** 

Name JOHANNSEN, STEPHEN D Name SCIPIONE, MICHAEL J Address 5 CENTENNIAL DRIVE Address **5 CENTENNIAL DRIVE** City-State-Zip: PEABODY MA 01960 PEABODY MA 01960 City-State-Zip:

Title Title Τ

GOOBER, ROBERT A Name SCIPIONE, MICHAEL J Address **5 CENTENNIAL DRIVE** Address **5 CENTENNIAL DRIVE** City-State-Zip: PEABODY MA 01960 City-State-Zip: PEABODY MA 01960

Title S Title D

Name GOOBER, ROBERT A Name SCIPIONE, MICHAEL J Address **5 CENTENNIAL DRIVE** Address **5 CENTENNIAL DRIVE** City-State-Zip: PEABODY MA 01960 City-State-Zip: PEABODY MA 01960

Title D Title D

Name BOCCHINO, JR., JOHN A Name YANUSKIEWICZ, FRANCIS W Address 5 CENTENNIAL DRIVE Address **5 CENTENNIAL DRIVE** 

City-State-Zip: PEABODY MA 01960 PEABODY MA 01960 City-State-Zip:

DIRECTOR/CHAIRMAN OF THE BOARD Title Title

BANKS, PAUL Name Name BOLINGER, EUGENE R

Address **5 CENTENNIAL DRIVE** Address 100 FOXBOROUGH BLVD, STE 250

City-State-Zip: PEABODY MA 01960 City-State-Zip: FOXBOROUGH MA 02035

Title D Title DIRECTOR/ASSISTANT TREASURER

Name MASTROCOLA, RICHARD E Name COOK, BARBARA K **5 CENTENNIAL DRIVE** Address Address **5 CENTENNIAL DRIVE** City-State-Zip: PEABODY MA 01960 City-State-Zip: PEABODY MA 01960

Title **DIRECTOR & ASSISTANT CLERK** Title D

Name RICCIARDI, FRANCIS M Name WESTER, CHRISTOPHER B

Address 5 CENTENNIAL DRIVE Address 273 DIVIDEND RD ROCKY HILL CT 06067 City-State-Zip: City-State-Zip: PEABODY MA 01960

Title DIRECTOR DIRECTOR Title

Name NICHOLS, KENT JOHANNSEN, STEPHEN D Name Address 5 CENTENNIAL DRIVE Address **5 CENTENNIAL DRIVE** 

PEABODY MA 01960 City-State-Zip: PEABODY MA 01960 City-State-Zip:

Title **DIRECTOR** Title DIRECTOR

Name GALLUCCI, DONALD Name KENNER, TODD **5 CENTENNIAL DRIVE** Address **5 CENTENNIAL DRIVE** Address

City-State-Zip: PEABODY MA 01960 City-State-Zip: PEABODY MA 01960