2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000711

Entity Name: F.W. BRYCE, INC.

Current Principal Place of Business:

8 POND ROAD

GLOUCESTER, MA 01930

Current Mailing Address:

8 POND ROAD

GLOUCESTER, MA 01930 US

FEI Number: 38-1313913 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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 Apr 20, 2021

Secretary of State

5399279290CC

Officer/Director Detail :

Title DIRECTOR Title DIRECTOR SHINGO, HAMADA Name Name OLSEN, LARS 8 POND ROAD 8 POND ROAD Address Address

GLOUCESTER MA 01930 GLOUCESTER MA 01930 City-State-Zip: City-State-Zip:

Title **TREASURER** Title **SECRETARY** Name KOZAKAI, KAZUO KOZAKAI, KAZUO Name

Address 15400 NORTHEAST 90TH STREET Address 8 POND ROAD

Title

SUITE 100

DIRECTOR

City-State-Zip: GLOUCESTER MA 01930 City-State-Zip: REDMOND WA 98052

Title **DIRECTOR**

Name TAKAHASHI, SEJI Name WARHOVER, STEVEN Address 8 POND ROAD Address 128 ROGERS ST.

City-State-Zip: GLOUCESTER MA 01930 City-State-Zip: GLOUCESTER MA 01930

Title ASSISTANT SECRETARY Title DIRECTOR

MOORES, IAN WILFRED Name Name MOORES, KEITH 33 CRESCENT RD. S. Address Address 71 FOREST ST.

HAMILTON MA 01982 City-State-Zip: City-State-Zip: MANCHESTER MA 01930

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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.

04/20/2021 SIGNATURE: IAN WILFRED MOORES ASSISTANT SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title PRESIDENT

Name MOORES, KEITH Address 71 FOREST ST.

City-State-Zip: MANCHESTER MA 01930