## **2022 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 Mar 30, 2022

**Secretary of State** 

7085296985CC

Officer/Director Detail:

TitleDIRECTORTitleDIRECTORNameSHINGO, HAMADANameOLSEN, LARSAddress8 POND ROADAddress8 POND ROAD

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

Title SECRETARY Title TREASURER

Name KOZAKAI, KAZUO Name KOZAKAI, KAZUO

Address 8 POND ROAD Address 15400 NORTHEAST 90TH STREET

Title

SUITE 100

**DIRECTOR** 

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

Title DIRECTOR

NameTAKAHASHI, SEJINameWARHOVER, STEVENAddress8 POND ROADAddress128 ROGERS ST.

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

Title ASSISTANT SECRETARY Title PRESIDENT, DIRECTOR

NameMOORES, IAN WILFREDNameMOORES, KEITHAddress33 CRESCENT RD. S.Address71 FOREST ST.

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

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: MOORES, IAN WILFRED

ASSISTANT SECRETARY

03/30/2022