

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004796

FILED  
Apr 22, 2011  
Secretary of State

Entity Name: AXCELIS TECHNOLOGIES, INC.

**Current Principal Place of Business:**

108 CHERRY HILL DRIVE  
BEVERLY, MA 01915

**New Principal Place of Business:**

**Current Mailing Address:**

108 CHERRY HILL DRIVE  
ATTN: TAX DEPT.  
BEVERLY, MA 01915 US

**New Mailing Address:**

FEI Number: 34-1818596      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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FLECHER, JOHN R  
Address: 108 CHERRY HILL DR  
City-St-Zip: BEVERLY, MA 01915

Title: D  
Name: THOMPSON, BRIAN  
Address: 108 CHERRY HILL DR  
City-St-Zip: BEVERLY, MA 01915

Title: D  
Name: PUMA, MARY  
Address: 108 CHERRY HILL DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: D  
Name: HARDIS, STEPHEN R  
Address: 108 CHERRY HILL DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: S  
Name: FALLON, LYNNETTE C  
Address: 108 CHERRY HILL DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: P  
Name: PUMA, MARY G  
Address: 108 CHERRY HILL DR  
City-St-Zip: BEVERLY, MA 01915

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: LYNNETTE C FALLON

SECR

04/22/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date