



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000115497		2. Exact name of the Corporation CBT/Childs Bertman Tseckares, Inc			
3. Principal office address 110 Canal Street			City Boston	State MA	Zip 02114
4. Business Phone No. 617-262-4354		5. State of Incorporation Massachusetts			
6. Brief description of the character of business conducted in Rhode Island The practice of Architecture					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Charles Tseckares			Vice-President Name		
Street Address 4 Dix Street			Street Address		
City Winchester	State MA	Zip 01890	City	State	Zip
Secretary Name Alfred Wojciechowski			Treasurer Name Richard Bertman		
Street Address 43 Halcyon Road			Street Address 159 Ward Street		
City Newton	State MA	Zip 02459	City Newton	State MA	Zip 02459
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name Charles Tseckares			Director Name Alfred Wojciechowski		
Street Address 4 Dix Street			Street Address 43 Halcyon Road		
City Winchester	State MA	Zip 01890	City Newton	State MA	Zip 02459
Director Name Richard Bertman			Director Name Margaret Deutsch		
Street Address 159 Ward Street			Street Address 2 Beaver Street		
City Newton	State MA	Zip 02459	City Boston	State MA	Zip 02108
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			10,000	Class A	No par value
			1,000	Class B	No par value

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JUL 01 2013

80407

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Margaret Deutsch

Signature of Authorized Representative

MARGARET DEUTSCH

Print or Type Name of Authorized Representative

28 June 2013
Date

Annual Report for 2013
Corporate ID No. 115497

Additional Directors

David Hancock
Lois Goodell
Chris Hill
David Nagahiro

Home Address

5 Ridgewood Drive, Malden, MA 02148
1102 Washington Street, Gloucester, MA 01930
3 Wolcott Avenue, Andover, MA 01810
26 Rockyhill Road, Andover MA 01810

FILED

JUL 01 2013

BY JD 115497