

1.) CORPORATION NAME:

ABT ASSOCIATES INC.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F0281313**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	970,842

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 55 WHEELER ST

CITY/ST/ZIP: CAMBRIDGE, MA 02138

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	KATHLEEN L FLANAGAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	55 WHEELER ST		
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02138		

NAME:	KEVIN O'REILLY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CORP CONT		
ADDRESS:	55 WHEELER ST		
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02138		

NAME:	RICHARD C SMALL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO		
ADDRESS:	55 WHEELER ST		
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02138		

NAME:	TERRENCE M FINN, ESQ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	55 WHEELER STREET		
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02138		

NAME:	WENDELL J KNOX	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	55 WHEELER ST		
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02138		

NAME:	STANLEY LUKOWSKI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	55 WHEELER STREET		
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02138		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CINNAMON DORNSIFE DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID ELLWOOD DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH NEWHOUSE DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN O DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY PERLIN DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN SINDING DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANNNE-MARIE SLAUGHTER DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALLISON TAUNTON-RIGBY DIRECTOR 55 WHEELER STREET CAMBRIDGE, MA 02138	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ KEVIN O'REILLY	KEVIN O'REILLY, VP/CORP CONT	5/20/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.