

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **828498** (6)

1. Corporation Name
H.P. HOOD & SONS, INC.



Principal Place of Business

Mailing Address

~~TAX DEPT~~
P.O. BOX 4933
SYRACUSE NY 13221

~~TAX DEPT~~
P.O. BOX 4933
SYRACUSE NY 13221

2. Principal Place of Business

2a. Mailing Address

21 **500 Rutherford Ave**
State, Apt #, etc.

26 **TREASURY DEPT**
State, Apt #, etc.

22
23 **BOSTON MA**
City & State
24 **02129** 25
Zip Country

27 **500 Rutherford Av**
City & State
28 **BOSTON MA**
City & State
29 **02129** 30
Zip Country

3. Date Incorporated or Qualified 08/15/1972	3a. Date of Last Report 04/21/1995
4. FFI Number 04-2507140	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1808, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was and is ordered by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS (See Section 607.0902, Florida Statutes) 13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12 (See Section 607.1808, Florida Statutes)

12. OFFICERS AND DIRECTORS		13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 TITLE	12.2 NAME	13.1 TITLE	13.2 NAME
	TD SCHAEJBE, ROBERT, E	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 STREET ADDRESS	60 NEWBURY ST SOMERVILLE MA		
12.4 CITY, ST, ZIP			
	PD KELLER, ROBERT, L	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 STREET ADDRESS	2050 BAUSS ROAD EAST GREENVILLE PA		
12.4 CITY, ST, ZIP	SD		
	BRAKE, PAMELA D	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 STREET ADDRESS	46 STETSON ROAD NORWELL MA		
12.4 CITY, ST, ZIP			
	AT FRANKENFIELD, MARTIN, P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	AT BRESTEN, Theresa M,
12.3 STREET ADDRESS	3323 MISTY COVE CIRCLE BALDWINVILLE NY		11 Linda Rd
12.4 CITY, ST, ZIP			WAKEFIELD MA
	<input type="checkbox"/> DELETE		
12.3 STREET ADDRESS			
12.4 CITY, ST, ZIP			
	<input type="checkbox"/> DELETE		
12.3 STREET ADDRESS			
12.4 CITY, ST, ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the register or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Theresa M. Bresten* **Theresa M. BRESTEN 1/23/96 617-242-0600**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)