

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

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PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 857243
 1. Corporation Name
Helmsman Management Services, Inc.

Principal Place of Business 175 Berkeley Street Boston, MA 02117	Mailing Address 175 Berkeley Street Boston, MA 02117
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2. Principal Place of Business 21 9 Riverside Road	2a. Mailing Address 26	3. Date Incorporated or Qualified 07/28/1983	3a. Date of Last Report
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 04-2791584	Applied For Not Applicable
City & State 23 Weston, MA	City & State 27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24 02193	Country 25 U.S.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent CT Corporation System 1200 S. Pine Island Road Plantation, FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	President Edmund F. Kelly	1.2 NAME	
STREET ADDRESS	315 Wellesley Street	1.3 STREET ADDRESS	
CITY-ST-ZIP	Weston, MA	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President Brock, Kenneth D.	2.2 NAME	
STREET ADDRESS	90 Highland Street	2.3 STREET ADDRESS	
CITY-ST-ZIP	Milford, MA 01757	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President/Secretary Gilvar, Barry S.	3.2 NAME	
STREET ADDRESS	11 Clarence Road	3.3 STREET ADDRESS	
CITY-ST-ZIP	Wayland, MA	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VT Williams, Elliot	4.2 NAME	
STREET ADDRESS	11 Hickory Lane, N.	4.3 STREET ADDRESS	
CITY-ST-ZIP	Reading, MA	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AS Pugh, James R.	5.2 NAME	
STREET ADDRESS	65 Colburn Road	5.3 STREET ADDRESS	800001857188 -06/10/96--01025--035 ***225.00
CITY-ST-ZIP	Wellesley, MA	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V Leddy, Amy J.	6.2 NAME	
STREET ADDRESS	31 Jodie Road	6.3 STREET ADDRESS	
CITY-ST-ZIP	Framingham, MA	6.4 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 receiver 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: _____ (Signature) _____ DATE: **6.10.96** (617) 357-9500 (Telephone #)

CR2E034 (12/95)

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HELMSMAN MANAGEMENT SERVICES, INC.

<u>OFFICE</u>	<u>NAME AND HOME ADDRESS</u>
Chairman and CEO	Gary L. Countryman 111 Hager St. Marlborough, MA 01752
President	Edmund F. Kelly 315 Wellesley Street Weston, MA
Chief Operating Officer	Stephen J. Ziellinski 132 Wood Pond Road South Windsor, CT 06074
Vice President/ Secretary	Barry S. Gilvar 11 Clarence Rd. Wayland, MA 01778
Vice President/ Treasurer	Elliot J. Williams 11 Hickory Lane, N. Reading, MA
Vice President	Kennith D. Brock 90 Highland Street Milford, MA 01757
Vice President	George W. Doonan 62 Kaufman Drive Peterborough, NH 03458
Vice President	Richard E. Leeman 60 Whiffletee Lane Marshfield, MA 02050
Vice President	Amy J. Leddy 31 Jodie Road Framingham, MA 01701
Vice President	Bobby J. Litke 58 Eden Park Drive North Attleboro, MA 02760
Assistant Secretary	James R. Pugh 65 Colburn Road Wellesley, MA
Assistant Secretary	Laurance H.S. Yahla 11 Massachusetts Avenue Harvard, MA 01451
Assistant Treasurer	Lawrence R. Levesque, Jr. 37 King Street Norfolk, MA 02056

HELMSMAN MANAGEMENT SERVICES, INC.**OFFICE****NAME AND HOME ADDRESS**

Assistant Treasurer

Scott T. Murphy
350 Commonwealth Avenue
Boston, MA 02117

Director

Gary L. Countryman
111 Hager St.
Marlborough, MA 01752

Director

Scott R. Goodby
180 W. Shore Drive
Marblehead, MA

Director

Robert H. Gruhl
22 Pine Cliff Drive
Marblehead, MA 01945

Director

Edmund F. Kelly
315 Wellesley Street
Weston, MA

Director

Gary P. Lia
25 Cobble Knoll Drive
Walpole, MA 02071

Director

Christopher C. Mansfield
50 Woodleigh Road
Dedham, MA 02026