## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F00000003424

Entity Name: BOSTON BANK OF COMMERCE

FILED Sep 13, 2002 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 133 FEDERAL STREET BOSTON, MA 02110 **Current Mailing Address: New Mailing Address:** 133 FEDERAL STREET BOSTON, MA 02110 FEI Number: 04-2764211 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARNES, GLORIA PEOPLES BANK OF COMMERCE 3275 NW 79TH ST MIAMI, FL 33147 US 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: CFO (X) Change ( ) Addition COHEE, KEVIN Name: Name: COHEE, KEVIN 133 FEDERAL STREET 133 FEDERAL STREET Address: Address: City-St-Zip: BOSTON, MA 02110 City-St-Zip: BOSTON, MA 02110 Title: VΡ Title: ( ) Delete (X) Change ( ) Addition Name: MUNDY, JAMES Name: MUNDY, JAMES 133 FEDERAL STREET 133 FEDERAL STREET Address: Address: BOSTON, MA 02110 BOSTON, MA 02110 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition HYMAN, SYVALIA III Name: Name: 434 MASSACHUSETTS AVE., SUITE 404 Address: Address: BOSTON, MA 021183510 City-St-Zip: City-St-Zip: Title: () Delete Title: **TREA** (X) Change ( ) Addition BURLEY, MICHAEL P BURLEY, MICHAEL P Name: Name: Address: 133 FEDERAL STREET Address: 133 FEDERAL STREET City-St-Zip: BOSTON, MA 02110 City-St-Zip: BOSTON, MA 02110 Title: Title: () Delete () Change () Addition CARR, RICHARD D Name: Name: 4 SKYLINE DRIVE Address: Address: City-St-Zip: WELLESLEY, MA 02181 City-St-Zip: Title: () Delete Title: () Change () Addition COHEE, KEVIN Name: Name: Address: 88 CLYDE STREET Address: City-St-Zip: City-St-Zip: CHESTNUT HILL, MA 02146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES MUNDY VP 09/13/2002