2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # J97589** Apr 20, 2000 8:00 am Secretary of State 1. Entity Name FLORIDA MIDLAND RAILROAD COMPANY, INC. 04-20-2000 90109 031 ***150.00 Principal Place of Business Mailing Address 53 SOUTHAMPTON RD 3001 ORANGE AVE WESTFIELD MA 01085-1371 PLYMOUTH FL 32768 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 58-1758851 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET STE 105 TALLAHASSEE FL 32301 Zip Code City 8. 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. <u> 25年27 29年3 88</u> 2013 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) . . Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PTD TITLE ☐ Change ☐ Addition Delete TITLE SILVER, MARJORIE P. NAME NAME STREET ADDRESS STREET ADDRESS 419 SOUTHWICK RD E20 CITY-ST-ZIP CITY-ST-7IP WESTFIELD MA ☐ Addition VSD Change ☐ Delete TITLE LEVINE, JOHN NAME 1157 FLORENCE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTHAMPTON MA ☐ Change ▲ Addition __ Delete TITLE____ TITLE FILLER, J NICOLAS ESQ Reed, John NAME NAME 455 MATTHEWS ST STREET ADDRESS 260 North Elm Street STREET ADDRESS Mestek, Inc. CITY-ST-7IP CITY-ST-ZIP CONWAY MA 01341 Westfield, MA 01085 ☐ Change X Addition TITLE TITLE ☐ Delete SMITH, ROBERT G NAME NAME Hartwell, Keith 419 SOUTHWICK RD E 20 STREET ADDRESS STREET ADDRESS 122 C Street NW, Suite 850 CITY-ST-ZIP WESTFIELD MA CITY-ST-ZIP Washington, DC 20001 X Addition X Delete TITLE Change TITLE LEDERMAN, LOUIS L NAME Levine, Anne L. NAME STREET ADDRESS STREET ADDRESS ONE FINANCIAL CENTER 81 Intervale Road CITY-ST-ZIP CITY-ST-ZIP **BOSTON MA** Newton Center, MA ☐ Change ☐ Addition TITLE ☐ Delete TITLE LAPLANTE, L DOUGLAS NAME NAME STREET ADDRESS BANK OF BOSTON, 1350 MAIN ST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SPRINGFIELD MA 01103

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. P. Silver

March 16, 2000 (413) 568-64