## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000005551

FILED Nov 10, 2005 Secretary of State

Entity Nai	ne: MWH#1	4 CORPORATION					
Current P	rincipal Place	e of Business:	New Prince	New Principal Place of Business:			
28 STATE	SOCIATES R STREET MA 02109	EALTY					
Current M	ailing Addre	ss:	New Maili	New Mailing Address:			
28 STATE	SOCIATES R STREET MA 02109	EALTY					
FEI Number:	58-2417788	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired (	)	
Name and	Address of (	Current Registered Agent:	Name and	Address of	New Registered Agent:		
1201 HAYS		CE COMPANY 01 US					
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUR	RE: LAURA F	R. DUNLAP					
	Electro	nic Signature of Registered Age	ent		Date		
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	RUANE, MICH	EET, 10TH FLOOR	Title: Name: Address: City-St-Zip:	•	()Change ()Addition		
Title: Name: Address: City-St-Zip:	Magno, Kare	EET, 10TH FLOOR	Title: Name: Address: City-St-Zip:	EGAN, RICH	REET 10TH FL		
Title: Name: Address: City-St-Zip:	DV (X HARMELING, I 28 STATE STR BOSTON, MA	EET 10TH FL	Title: Name: Address: City-St-Zip:	,	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VTS (X EGAN, RICHAI 28 STATE STR BOSTON, MA	EET 10TH FL	Title: Name: Address: City-St-Zip:	,	()Change ()Addition		
Title: Name:	V (X BRAUER, HEN	() Delete RY	Title: Name:		( ) Change ( ) Addition		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MICHAEL A. RUANE Ρ 11/10/2005

28 STATE STREET 10TH FL

BOSTON, MA 02109

Address: City-St-Zip: