

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1998



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

DOCUMENT # P22899 (9)
 1. Corporation Name
CALIFORNIA PRODUCTS CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**169 WAVERLY STREET
 CAMBRIDGE MA 02139
 US**

Mailing Address
**PO BOX 390569
 CAMBRIDGE MA 02139-0007
 US**

3. Date Incorporated or Qualified
02/07/1989

4. FEI Number
04-1143180

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

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 **FL** 85 Zip Code

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

Signature type: For printed name of registered agent and officer, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	AT	<input type="checkbox"/> DELETE
NAME	MULLANE, JEREMIAH F.	
STREET ADDRESS	303 PARK AVE.	
CITY-ST-ZIP	ARLINGTON MA 02174	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	DEANGELIS, JOSEPH	
STREET ADDRESS	25 APPLETON ROAD	
CITY-ST-ZIP	WAKEFIELD MA 01880	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LOHR, DAVID G.	
STREET ADDRESS	35 WALTZ WAY	
CITY-ST-ZIP	CHEPACHET RI 02814	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WOODHULL, ROGER W.	
STREET ADDRESS	44 MACK HILL ROAD	
CITY-ST-ZIP	AMHERST NH 03031	
TITLE	V	<input type="checkbox"/> DELETE
NAME	TUCKER, ARTHUR F.	
STREET ADDRESS	39 ALDERBROOK DRIVE	
CITY-ST-ZIP	TOPSFIELD MA 01983	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CHILD, RONALD B.	
STREET ADDRESS	28 OLDE FARMS ROAD	
CITY-ST-ZIP	BOXFORD MA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. 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 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: *Jeremiah F. Mullane* **Jeremiah F Mullane 2/05/98 (617)547-5300** EXT 274

CR2E034 (10/97)