


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 04, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P34822 1. Entity Name BTMU CAPITAL CORPORATION	
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Principal Place of Business 111 HUNTINGTON AVE. 400 BOSTON, MA 02199	Mailing Address 111 HUNTINGTON AVE. 400 BOSTON, MA 02199
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03132006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 22-3031156	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when restate[ing]) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 * After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000491603 04/19/06-80031-003 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO MEEHAN, DAVID A 111 HUNTINGTON AVE., STE. 400 BOSTON, MA 02199
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NOLAN, PAUL F 111 HUNTINGTON AVE. SUITE 400 BOSTON, MA 02199
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV QUINN, RICHARD 111 HUNTINGTON AVE. SUITE 400 BOSTON, MA 02199
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HELMAN, MARK A 111 HUNTINGTON AVE., STE. 400 BOSTON, MA 02199
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HORTON, CHARLES E 111 HUNTINGTON AVE. SUITE 400 BOSTON, MA 02199
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles E. Horton VICE PRESIDENT 3/29/06 617-573-9000  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #