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Jan 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P37808 (3)
1. Corporation Name: TCG BOSTON, INC.



Principal Place of Business: 189 STATE STREET BOSTON MA 02109
Mailing Address: THE COLONY GROUP 199 STATE STREET BOSTON MA 02109-2648

3. Date Incorporated or Qualified: 03/09/1992
3a. Date of Last Report: 03/06/1996
4. FEI Number: 04-2911987
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: HAMILTON, KIRBY A. 2612 S.E. 21ST STREET FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

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] DATE: [Blank]

12. OFFICERS AND DIRECTORS
1.1 TITLE: P
1.2 NAME: HAMILTON, KIRBY A.
1.3 STREET ADDRESS: 2612 SE 21 ST.
1.4 CITY - ST - ZIP: FT LAUDERDALE FL
2.1 TITLE: PT
2.2 NAME: RAIMONDI, PETER J
2.3 STREET ADDRESS: ONE SEAL HARBOR ROAD
2.4 CITY - ST - ZIP: WINTHROP MA
3.1 TITLE: C
3.2 NAME: SADLER, STEPHEN T.
3.3 STREET ADDRESS: 81 CEDER LANE
3.4 CITY - ST - ZIP: WESTWOOD MA 02090

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE: Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE: Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE: Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE: Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE: Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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: [Signature] DATE: 1/14/97 617 723-8200

CR2E034 (9/96)