

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P94000090134 (5)

1. Corporation Name
CASTLEROCK ESTATES, INC.



Principal Place of Business
**1400 S OCEAN BLVD. N-306
 BOCA RATON FL**

Mailing Address
**150 POWDERMILL ROAD
 MAYNARD MA 01754
 US**

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

**THE PRENTICE HALL CORPORATION SYSTEM, INC.
 1201 HAYS ST, 105
 TALLAHASSEE FL 32301**

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 607.02(2)(a) and 607.1509, Florida Statutes, the above named corporation shall file 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 607.02(2)(a), Florida Statutes.

SIGNATURE

Joseph A. Maillet

N/A

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	MAILLET, JOSEPH A	
STREET ADDRESS	1600 WASHINGTON STREET	
CITY-ST-ZIP	WEST NEWTON MA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
17 NAME	
17 STREET ADDRESS	
17 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
17 TITLE	
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17 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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17 STREET ADDRESS	
17 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 -04/01/96--01015--027
 ***200.00

SIGNATURE:

Joseph A. Maillet
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/96

508-897-6419

CR2E034 (12/95)

Handwritten initials and date