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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000087911 (2)

9TH STREET NORTH COMPANY

Principal Place of Business Mailing Address 57 OLD COUNTY RD., N. % WILFRED E. GARDNER **NEWBURY NH 0325**5 20 WILLIAM STREET, SUITE 120 WELLESLEY MA 02181-4102 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/27/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 04-1640710 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PTD DELETE TITLE 1.1 TITLE ☐ Change Addition KANE, CHARLES F NAME 1.2 NAME **57 OLD COUNTY RD NO** STREET ADDRESS 1.3 STREET ADDRESS **NEWBURY NH** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE 2.1 TITLE Change Addition NAME KANE, CHARLES F JR 2.2 NAME 1 BEACON STR STREET ADDRESS 2.3 STREET ADDRESS **BOSTON MA** CITY-ST-ZIP 2.4 CHY-ST-ZIP DELETE TITLE 3 1 TITLE Change Addition KANE, CONSTANCE F NAME 3.2 NAME 1 BEACON STR STREET ADDRESS 3.3 STREET ADDRESS **BOSTON MA** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE Change 4.1 TITLE ☐ Addition GARDNER, WILFRED E NAME 4. 2 NAME **76 GARDEN RD** STREET ADDRESS 4.3 STREET ADDRESS WELLESLEY HILLS MA CiTY-ST-7IP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filting 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

1/22/20

Addition

FILED

Feb 04 1998 8:00am

Secretary of State