


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90102 026 ***150.00

DOCUMENT # F01000004703 1. Entity Name SHEPLEY BULFINCH RICHARDSON AND ABBOTT INCORPORATED					
Principal Place of Business 40 BROAD STREET BOSTON, MA 02109-4306			Mailing Address 40 BROAD STREET BOSTON, MA 02109-4306		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 04-2504672	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EGELESTON, OLIVER 40 BROAD ST. BOSTON, MA 02109	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FREEMAN, GEOFFREY T 40 BROAD ST. BOSTON, MA	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ERICSON, ELIZABETH S 40 BROAD ST. BOSTON, MA	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HEESPELINK, H. JAN 40 BROAD ST. BOSTON, MA	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BELL JR, PAUL E 40 BROAD ST. BOSTON, MA	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JACKSON, RALPH T 40 BROAD ST. BOSTON, MA	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 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: <u>Michael Ward</u> 4/8/04 617-423-1700 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

Attachment

44029625

Doc # F01000004703

Line 11 – Officers and Directors

Title:	P	Title:	V
Name:	Carole C. Wedge	Name:	Henry H. Abernathy, Jr.
Address:	40 Broad Street	Address:	40 Broad Street
City, State, Zip:	Boston, MA 02109	City, State, Zip:	Boston, MA 02109
Title:	D	Title:	V
Name:	Malcolm P. Kent	Name:	Jennifer Aliber
Address:	40 Broad Street	Address:	40 Broad Street
City, State, Zip:	Boston, MA 02109	City, State, Zip:	Boston, MA 02109
Title:	D	Title:	V
Name:	Garrold E. Baker	Name:	Wagdy A.Y. Anis
Address:	40 Broad Street	Address:	40 Broad Street
City, State, Zip:	Boston, MA 02109	City, State, Zip:	Boston, MA 02109
Title:	C	Title:	V
Name:	Elise F. Woodward	Name:	Paul E. Bell, Jr.
Address:	40 Broad Street	Address:	40 Broad Street
City, State, Zip:	Boston, MA 02109	City, State, Zip:	Boston, MA 02109
Title:	D	Title:	V
Name:	Ronald T. Finiw	Name:	Elizabeth S. Ericson
Address:	40 Broad Street	Address:	40 Broad Street
City, State, Zip:	Boston, MA 02109	City, State, Zip:	Boston, MA 02109
Title:	D	Title:	V
Name:	Alexander Howe	Name:	Jonathan Gyory
Address:	40 Broad Street	Address:	40 Broad Street
City, State, Zip:	Boston, MA 02109	City, State, Zip:	Boston, MA 02109
		Title:	V
		Name:	James F. Hunnewell, Jr.
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109
		Title:	V
		Name:	Thomas D. Kearns
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109
		Title:	V
		Name:	William S. Mead
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109
		Title:	V
		Name:	Jonathan D. Ross
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109
		Title:	V
		Name:	Timothy R. Twomey
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109
		Title:	V
		Name:	Ray K. Warburton
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109
		Title:	T
		Name:	Michael W. Ward
		Address:	40 Broad Street
		City, State, Zip:	Boston, MA 02109