## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 04, 2000 8:00 am Secretary of State **DOCUMENT #819989** HARCOURT GENERAL, INC. 04-04-2000 90082 048 \*\*\*150.00 Principal Place of Business Mailing Address 27 BOYLSTON ST. 27 BOYLSTON ST. P.O. BOX 1000 P.O. BOX 1000 CHESTNUT HILL MA 02167 CHESTNUT HILL MA 02467-1719 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 04-1619609 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 02467 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. TITLE Defete TITI F Change Addition KNEZ, BRIAN J NAME STREET ADDRESS STREET ADDRESS 27 BOYLSTON STREET CITY-ST-ZIP CITY-ST-ZIP CHESTNUT HILL MA Delete ☐ Change Addition CD TITLE TITLE SMITH, RICHARD A NAME NAME STREET ADDRESS STREET ADDRESS 27 BOYLSTON CITY-ST-ZIP CITY-ST-ZIP CHESTNUT HILL MA ☐ Change Addition TITLE ☐ Delete TITLE NAME ROBERT A SMITH NAME STREET ADDRESS STREET ADDRESS 27 BOYLSTON CITY-ST-ZIP CITY-ST-ZIP CHESTNUT HILL MA Senior Vice President, Secretary ☐ Delete Addition TITLE NAME **ERIC P GELLER** NAME STREET ADDRESS STREET ADDRESS 27 BOYLSTON CITY-ST-ZIP CITY-ST-ZIP CHESTNUT HILL MA TITLE Delete ☐ Change ☐ Addition NAME COOK, JOHN R NAME STREET ADDRESS STREET ADDRESS 27 BOYLSTON

CHESTNUT HILL MA 13. 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 11 or Block 12 if changed, or on an attachment with all address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CHESTNUT HILL MA

GIBBONS, PAUL F.

27 BOYLSTON ST.

City-ST-ZIF

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

PASSISTANT TREASURER 3/31/00

☐ Delete

☐ Change

Addition