

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

FILED

**May 20 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 828498 (6)

1. Corporation Name
H.P. HOOD & SONS, INC.



Principal Place of Business 90 EVERETT AVE SUITE 200 CHELSEA MA 02150 US	Mailing Address 90 EVERETT AVE SUITE 200 CHELSEA MA 02150 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 500 RUTHERFORD AVE Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 CHARLESTOWN, MA Zip
24 Country	29 02129 Country
25	30

3. Date Incorporated or Qualified 08/15/1972	
4. FEI Number 04-2507140	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRESTEN, THERESA	1.2 NAME	
STREET ADDRESS	25 ZACHARY LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	READING MA	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KANE, JOHN A.	2.2 NAME	
STREET ADDRESS	34 MASCONOMO ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MANCHESTER MA	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRAKE, PAMELA D.	3.2 NAME	MARC E. GANEK
STREET ADDRESS	48 STETSON ROAD	3.3 STREET ADDRESS	7 ZAMBON TERRACE
CITY-ST-ZIP	NORWELL MA	3.4 CITY-ST-ZIP	ANDOVER, MA 01812
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KANE, GARY	4.2 NAME	
STREET ADDRESS	12 SMITH'S POINT RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	MANCHESTER 01	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KANE, STEPHEN	5.2 NAME	
STREET ADDRESS	72 HIGHLAND RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH HAMPTON NH	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

CR2E034 (10/97)