

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

**FILED**  
**May 12, 1999 8:00 am**  
**Secretary of State**

05-12-1999 90007 009 \*\*\*150.00

0000324

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

**DOCUMENT # 834364**  
 1. Corporation Name  
**BTM FINANCIAL & LEASING CORPORATION**

Principal Place of Business 125 SUMMER ST (02110) P.O. BOX 2332 BOSTON MA 02107	Mailing Address 125 SUMMER ST (02110) P.O. BOX 2332 BOSTON MA 02107 US
--	--



DO NOT WRITE IN THIS SPACE

21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
---	---

3. Date Incorporated or Qualified <b>05/01/1975</b>	4. FEI Number <b>04-6077779</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION-FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

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 signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	LEO R. CHAUSSE	
STREET ADDRESS	125 SUMMER STREET	
CITY-ST-ZIP	BOSTON MA 02110	
TITLE	VPT	<input type="checkbox"/> DELETE
NAME	PLUGIS, ERIC	
STREET ADDRESS	125 SUMMER ST	
CITY-ST-ZIP	BOSTON MA 02110	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	SPOKOWSKI, PHILIP A.	
STREET ADDRESS	125 SUMMER STREET	
CITY-ST-ZIP	BOSTON MA 02110	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	HORTON, C E JR	
STREET ADDRESS	125 SUMMER STREET	
CITY-ST-ZIP	BOSTON MA 02110	
TITLE	SRVP	<input type="checkbox"/> DELETE
NAME	MALONEY, KATHLEEN	
STREET ADDRESS	125 SUMMER ST	
CITY-ST-ZIP	BOSTON MA 02110	
TITLE	DEVP	<input type="checkbox"/> DELETE
NAME	WINSCHER, JAMES F JR	
STREET ADDRESS	125 SUMMER ST	
CITY-ST-ZIP	BOSTON MA 02110	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	AKIRA TOMIOKA	
1.3 STREET ADDRESS	125 SUMMER STREET	
1.4 CITY-ST-ZIP	BOSTON, MA 02110	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	SEC/SRVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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, with all other like empowered.

SIGNATURE: *Philip A. Spokowski* **PHILIP A. SPOKOWSKI, VP 4/21/99 (617) 573-9000**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

540641-90007-9

# 834364

OFFICERS AND DIRECTORS:-

NAME

OFFICE

ADDRESS

DIRECTORS

Hiroshi Watanabe

Chairman

425 East 58<sup>th</sup> Street  
New York, NY 10022

546041-90007-9

<u>NAME</u>	<u>OFFICE</u>	<u>ADDRESS</u>
<u>DIRECTORS</u>		
Akira Tomioka	Director	2 Louisburg Square #1 Boston, MA 02108
James F. Winschel, Jr.	Director	11 Cudworth Lane Sudbury, MA 01776

#834364

<u>NAME</u>	<u>OFFICE</u>	<u>ADDRESS</u>
<u>OFFICERS</u>		
Hiroshi Watanabe	Chairman of the Board of Directors	425 East 58 <sup>th</sup> Street New York, NY 10022
Akira Tomioka	President and Chief Executive Officer	2 Louisburg Square #1 Boston, MA 02108
James F. Winschel, Jr.*	Executive Vice President	11 Cudworth Lane Sudbury, MA 01776
David A. Meehan*	Executive Vice President	95 Orchard Street Belmont, MA 02178
Kathleen R. Maloney	Senior Vice President, General Counsel, Secretary and Clerk	50 Freedom Hollow #403 Salem, MA 01970
Joseph W. O'Brien*	Vice President	220 Manomet Avenue P.O. Box 1391 Manomet, MA 02345
Rory Laughna*	Senior Vice President	3 Noannet Circle Westwood, MA 02090
Patricia Donoghue*	Vice President	79 Channing Road Watertown, MA 02172
Paul Goss*	Vice President	18 Sea Fox Lane Gloucester, MA 01930
Kathleen Hall*	Vice President	13 Wakeland Road Dover, MA 02030
Mark A. Helman	Vice President, Assistant Secretary and Assistant Clerk	27 Edgewood Road Wayland, MA 01778