

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 846868 (8)

1. Corporation Name

BOT FINANCIAL & LEASING CORPORATION B-4

New Name: BTM Financial & Leasing Corporation B-4

Principal Place of Business

Mailing Address

125 SUMMER ST (021101625)
P.O. BOX 2332
BOSTON MA 02107
US

125 SUMMER ST (021101625)
P.O. BOX 2332
BOSTON MA 02107
US



3. Date Incorporated or Qualified

09/03/1980

3a. Date of Last Report

05/01/1995

4. FEI Number

04-2586399

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP ☐ DELETE

NAME SPOKOWSKI, PHILIP A.
STREET ADDRESS 31 BARNSTABLE ROAD
CITY - ST - ZIP WELLESLEY MA

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE SVP ☐ DELETE

NAME CAROLAN, RICHARD E.
STREET ADDRESS 60 LIVINGSTON ROAD
CITY - ST - ZIP WELLESLEY MA

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE DCP ☐ DELETE

NAME MCCULLOCH, EUGENE F., JR
STREET ADDRESS 182 DEDHAM STREET
CITY - ST - ZIP DOVER MA

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE SVP ☐ DELETE

NAME LIEBER, MICHAEL W.
STREET ADDRESS 85 BERKSHIRE ROAD
CITY - ST - ZIP NEWTON MA

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE SVP ☐ DELETE

NAME STERNSTEIN, PHILIP S.
STREET ADDRESS 38 LEHIGH ROAD
CITY - ST - ZIP WELLESLEY MA

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE VP ☐ DELETE

NAME HORTON, CHARLES E.
STREET ADDRESS 3 SCOTLAND HEIGHTS
CITY - ST - ZIP NORTH READING MA

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

See Attached List

125 Summer Street
Boston, MA 02110 For All

700001793837

04/25/96-01015-038

***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Charles E. Horton, Jr. 4/16/96 (617) 573-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)