

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 24, 2002 8:00 am**  
**Secretary of State**

07-24-2002 90189 034 \*\*\*550.00

**DOCUMENT #** F00000005171

**1. Entity Name**

Heritage SPE Corp.

**DO NOT WRITE IN THIS SPACE**

**971016**

**2. Principal Place of Business**  
535 Boylston Street

**3. Mailing Address**  
535 Boylston Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**  
Boston, MA

**City & State**  
Boston, MA

**4. FEI Number**  
04-3530043

**Applied For**  
☐ Not Applicable

**Zip**  
02116

**Country**  
USA

**Zip**  
02116

**Country**  
USA

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name**  
C T CORPORATION SYSTEM

**Street Address (P.O. Box Number is Not Acceptable)**  
1200 SOUTH PINE ISLAND ROAD

**City** PLANTATION **FL** **Zip Code** 33324

**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.

(NOTE: Registered Agent Signature required when reinstating)

**DATE**

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.** ☐  
(See criteria on back)

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP
	See attached list		

**DO NOT WRITE  
IN THIS SPACE**

**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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick Sullivan

7/15/02

617-247-2200

Date

Daytime Phone #

CR2E034B (12/01)

attachment

971014  
FD0000005171

HERITAGE SPE CORP.

OFFICERS

NAME	TITLE	BUSINESS ADDRESS
Thomas C. Prendergast	President	535 Boylston Street Boston, MA 02116

The Corporation does not  
currently have a Treasurer

Gary Widett	Senior Vice President and Assistant Secretary	535 Boylston Street Boston, MA 02116
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Lou Zicht	Vice President and Assistant Secretary	535 Boylston Street Boston, MA 02116
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Patrick O'Sullivan	Vice President and Assistant Treasurer	535 Boylston Street Boston, MA 02116
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Mark E. Robinson	Secretary	150 Federal Street Boston, MA 02110
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Joanne D.C. Foley	Assistant Secretary	150 Federal Street Boston, MA 02110
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DIRECTORS

NAME	BUSINESS ADDRESS
Thomas C. Prendergast	535 Boylston Street Boston, MA 02116

Gary Widett	535 Boylston Street Boston, MA 02116
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Lori Conte	250 West 55 <sup>th</sup> Street New York, NY 10019
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Mark Ferrucci	1209 Orange Street Wilmington, DE 19801
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