FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT

CR2E081 (12/07)

96-08

DOCUMENT # F93000002967

1. Corporation Name

New Boston Fund, Inc.

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
60 State Street		60 State Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 1500		Suite 1500	
City & State		City & State	
Boston, MA		Boston, MA	
Zip	Country	Zip	Country
02109	USA	02109	USA

4. Date Incorporated or Qualified To Do Business in Florida 06/28/1993

5. FEI Number 04-3187720 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED [ ] $5.75 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City	State	Zip Code
Plantation	FL	33324

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent TRACI HOUCK SPECIAL ASSISTANT SECRETARY Date 4/15/08

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Jerome L. Rappaport, Jr.	60 State St., Suite 1500	Boston, MA 02109
CSTD	James W. Rappaport	60 State St., Suite 1500	Boston, MA 02109
AS	Janet F. Aserkoff	60 State St., Suite 1525	Boston, MA 02109
D	Jerome L. Rappaport, Sr.	60 State St., Suite 1525	Boston, MA 02109
D	Phyllis E. Rappaport	60 State St., Suite 1500	Boston, MA 02109

10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Janet F. Aserkoff, Assistant Secretary 04/15/08 617-227-7345

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

M. Williams APR 16 2008

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

NEW BOSTON FUND, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$1,950.00

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