FIL	E NOW: FILING FE	E AFTER MAY	1 IS \$22	25,00				
COF	PROFIT CORPORATION ANNUAL REPORT Sandra		A DEPARTMENT of Sandra B Mortha	OF STATE				
	1996 DIVISION OF COL				ļ			
DOCUMENT # F93000005284 (5) 1. Corporation Name								
J.1	D. Eastrich Proper	ties Corporati	on					
Principal Place	e of Business	Mailing Address						
c/o Aldrich Eastman Waltch 225 Franklin Street Same Boston, MA 02110						rated or Qualified	3a. Date of Last I	· ·
Principal Place of Business Address Address					4. FET Number		8/7/9	Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			-4.		04-	-3213186		Not Applicable
27			etc.		5. Certificate of	Status Desired	1 1	5 Additional Required
City & State	& State City & State 28						00 May Be	
Zip 24	Country 25	Ζφ. 29	30 Cou	ntry	8. This corporat Florida Statut	ion has liability for int es 🔲 Yes	angible tax under s	
	9. Name and Address of Cur	rent Registered Agent		81 Name		ddress of New Re	gistered Agent	
The Prentice Hall Corporation System, Inc. 1201 Hays Street, Suite #105 Tallahassee, FL 32301 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83								
84 City							85 Z	p Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of familiar with, and accept the chilinations of Section 607.0508, Florida Statutes.						atement for the purpo	ose of changing its	rea-stered office
	th, and accept the obligations of, Si			orpxoration's	board of directors. There	by accept the appoin	tment as régisfere	Tagent Farn
SIGNATURE .	Signature, typod or printed name of registered as	gent and life if applicable	(NOFE Example) ed	Agent signal ure:	required when reinstating)		OA'E	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/C	HANGES TO OFFICE		DRS IN 12
THTLE NAME	President/Director DELETE Joseph F. Azrack				Assistant Cl	erk .	☐ Change	CR2E034 (12.95)
STREET ADDRESS				12 NAME Arteen M. Bernard: 13 STREET ADDRESS 32 West rate Rd.		88		
CITY-ST-ZIP	Boston, MA 02110			1.4 CHTY - ST - ZIP Milton		DAIBLA		32E
TITLE NAME	Vice-President/Director Delete Thomas H. Nolan			2 1 TIFLE		☐ Change	☐ Addition ☐	
STREET ADDRESS	225 Franklin Street		2 2 NAI	ME REET ADDRESS				
CITY-ST-ZIP	Boston, MA 02110			Y-ST-ZIP				
TIFLE .	Vice-President/Director			LF .			☐ Change	Addition
NAME Street address	J.Grant Monahon ESS 225 Franklin Street		32 NAI					
CITY-ST-ZIP	Boston, MA 02110			REET ADDRESS Y-ST-ZIP				
TITLE	Vice-President	DELFT:					☐ Change	ne tibbA
NAME STREET ADDRESS	Peter W. Ahl 225 Franklin Stree	a+	4.2 NA/					
	Boston, MA 02110			EEF ADOPESS Y-ST-ZIP				ļ
TITLE	Vice-President	₩ DELF1			• ~~		Change	Addition
NAME States appeared	John L. Sullivan	. 1	5 2 NAM	AE .	1 UU -07/1	00189 : 9/960100	8861 R021	ا ا
	s 225 Franklin Street Boston, MA 02110		■	EEF ADDRESS	***20		o ori	1-46
	Vice-President	▼ DELETE		(\$1 - ZiP LÉ			Totalae	Addition
NAME	Peter D. Levin		6.2 NAA	ME.				
STREET ADDRESS CITY-ST-ZIP	Poston MA ACMAD			EET AFIDRESS	1016)			546)
14. I do hereby certify that the information supplied with this tend is voluntarily furnished and do				r-SI-Z⊪ oes not qua	lify for the exemption state	ed in Section 119 07	3)(k). Florida Starot)
certify that the information indicated or this annual report of pupplemental annual report is true and accurate and that my signature shall have the same legal effect at if made under oath; that I am an officer or director of the compration 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 18 or changed, or on an attackment with an address.								
SIGNATURE: 4 30 96 617 261 4000								
	SIGNATURE AND TYPED	OR PRINTED NAME OF SIGNING	OFFICER OR DIRECTO	A .	······································	-4°E >	Daytine Phone	, 1000