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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 17 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F93000005731 (5)

EASTRICH NO. 140 CORPORATION Principal Place of Business Mailing Address C/O ALDRICH, EASTMAN & WALTCH, L.P. C/O ALDRICH, EASTMAN & WALTCH, L.P. 225 FRANKLIN STREET 225 FRANKLIN STREET DO NOT WRITE IN THIS SPACE BOSTON MA 02110 BOSTON MA 02110 3. Date Incorporated or Qualified 12/17/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 04-3218185 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Yes ☐ No 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 City Zip Code 85 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 tille if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DVPC TITLE DELETE Change Addition MONAHON, J G NAME 1.2 NAME CR2E034 **68 SNAKEHILL ROAD** STREET ADDRESS 1.3 STREET ADDRESS **BELMONT MA** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE ALBERT, THOMAS K NAME 22 NAME 176 OCEAN ST. STREET ADDRESS 2.3 STREET ADDRESS **LYNN MA 02178** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE GIFFORD, ROBERT G NAME 3.2 NAME 41 OXFORD ROAD STREET ADDRESS 3.3 STREET ADDRESS **NEWTON CENTER MA** CITY-\$T-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE LAGERLUND, KARIN NAME 4. 2 NAME 225 FRANKLIN ST. STREET ADDRESS 4.3 STREET ADDRESS **BOSTON MA** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE BIEBUSCH, DOREEN M NAME 5.2 NAME 75 FOUNDRY ST #35 STREET ADDRESS 5.3 STREET ADDRESS S EASTON MA CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE ☐ Change ☐ Addition 6.1 TITLE BERNARDI, ARLEEN NAME 6.2 NAME 22 WESTVALE RD. STREET ADDRESS 6.3 STREET ADDRESS MILTON MA 02186 CITY-ST-ZIP 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 atlachment with an address.

2/20148