

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000005845

1. Entity Name

HPSC FUNDING CORP. I

FILED

May 12, 2000 8:00 am
Secretary of State

05-12-2000 90055 037 ***150.00

Principal Place of Business

Mailing Address

60 STATE ST
35TH FLOOR
BOSTON MA 02109-1803
US

60 STATE ST.
35TH FL
BOSTON MA 02109-1803
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

04-3212153

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME EVERETS, JOHN JR
STREET ADDRESS 72 CHESTNUT ST
CITY-ST-ZIP BOSTON MA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE STD
NAME DOHERTY, RAYMOND R
STREET ADDRESS 242 CROSS ST.
CITY-ST-ZIP BELMONT MA 02178

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME TINLEY, JAMES W
STREET ADDRESS 21 HIBRALTER LANE
CITY-ST-ZIP AVON CT

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE AS
NAME KENNEY, RICHARD L.
STREET ADDRESS 60 STATE ROAD 35
CITY-ST-ZIP BOSTON MA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE AS
NAME MCMAHAN, DENNIS J
STREET ADDRESS 60 STATE STREET 35
CITY-ST-ZIP BOSTON MA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard L. Kenney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/28/00 607 720 3000
Date Daytime Phone #

CR2E034 (9/99)