· FLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.							
APPLIC FC REINSTA	R	FLORIDA DEPARTMENT OF S Sandra B. Mortham Secretary of State Division of CÓRPORATIONS		tham State		FILED	
					97 FEB 24 PM 3:00		
DOCUMENT # F95000002265					SECFIETARY OF STATE TALLAHASSEE, FLORIDA		
AEW NO. 66 CORPORATION					TALLAHASSEE, I LOUIS		
					1		
Principal Place of Business Mailing Address					30	-02/24/9701118001	
			Franklin Street		-02/24/9/01118001 #####983.75 #####983.75		
Boston, MA 02110 Boston, MA 02110						TATENSENT AL AT	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					KEIND INITE IN THIS SPACE		
2. New Principal Office Address, II Applicable 3. New Ma			т (т		To Do Bush	orated or Qualified less in Florida	
Suite, Apt. #, etc. Sui			Suite, Apt. #, etc.		05/09/95 5. FEI Number Applied For		
City & State		City & State	City & State			629 Not Applicable	
Zıp	Country	Zip	Country	/	6. CERTIFICATI	E OF STATUS DESIRED S 88.75 Additional Fee required	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Title(s) and/or Directors			Off	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)		City / State / Zip	
DVS MONAHON, J. GRANT			225 Franklin Street		iumpers)	Boston, MA 02110	
DP GIFFORD, ROBERT G.			225 Franklin Street		<u></u>	Boston, MA 02110	
DV AL	DV ALBERT, THOMAS K.			225 Franklin Street		Boston, MA 02110	
Ŧ GR	Ŧ GROSSy-GERD-A.			225-Franklin-Street		Bostony-MA-02110	
¥ PA	PARKER,-RANDY-J.		225-Franklin-Street			Bestony-MA-02110	
JB7-24-						JBJ-24-97	
8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent		
Prentice Hall Corporation System, Inc. Street Address				P.O. Box Number is Not Acceptable)			
Tallahassee, FL 32301			Suite, Apt. #, Etc.				
City				City	State Zip Code		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.							
Signature of Registered Agent Aleborah D. Skipper Registered Agent Date 1/24/97 REGISTERED AGENT MUST SIGN							
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No 🗴 (See other side for information on intangible tax.)							
12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I re- lease the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or offector or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application have been paid. 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: SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Print Pr							