

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000004588 (8)
 1. Corporation Name
ELSON T. KILLAM ASSOCIATES, INC.



Principal Place of Business 27 BLEEKER ST. MILLBURN NJ 07041-1008	Mailing Address 27 BLEEKER ST. MILLBURN NJ 07041-1008
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/21/1995		3a. Date of Last Report	
21		26	81 Wyman Street	4. FEI Number 22-1613021		Applied For Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. City & State		28. City & State Waltham, MA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip 02254	30. Country USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent			
				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85 Zip Code

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (If the Registered Agent Signature required when registering)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	APPLETON, JOHN P			1.2 NAME			
STREET ADDRESS	81 WYMAN ST.			1.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			1.4 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PAINTER, JONATHAN W			2.2 NAME			
STREET ADDRESS	81 WYMAN ST.			2.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			2.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LAMBERT, SANDRA L			3.2 NAME			
STREET ADDRESS	81 WYMAN ST.			3.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			3.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		4.1 TITLE	A/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AGHABABIAN, ROBERT V			4.2 NAME			
STREET ADDRESS	81 WYMAN ST.			4.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			4.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		5.1 TITLE	A/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOOGASIAN, SETH H			5.2 NAME			
STREET ADDRESS	81 WYMAN ST.			5.3 STREET ADDRESS			
CITY-ST-ZIP	WALTHAM MA 02254			5.4 CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HERKERT, EMIL C			6.2 NAME			
STREET ADDRESS	27 BLEEKER ST.			6.3 STREET ADDRESS			
CITY-ST-ZIP	MILLBURN NJ 07401			6.4 CITY-ST-ZIP			

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, with an attachment with an address.

SIGNATURE: Robert V. Aghababian Robert V. Aghababian 4/30/96 (617) 622-1000
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

ADDITIONAL OFFICERS AND DIRECTORS FOR
ELSON T. KILLAM ASSOCIATES, INC.

ASSISTANT SECRETARIES:

Paul F. Kelleher
Franklin O. Williamson
Kenneth L. Zippler

81 Wyman Street, Waltham, MA 02254
27 Bleeker Street, Millburn, NJ 07041
27 Bleeker Street, Millburn, NJ 07041

Directors:

Fletcher N. Platt
William A. Rainville
Bruce J. Taunt

27 Bleeker Street, Millburn, NJ 07041
81 Wyman Street, Waltham, MA 02254
12068 Market Street, Livonia, MI 48150