

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000004999 (7)

1. Corporation Name

FECHTOR, DETWILER & CO., INC.



Principal Place of Business 225 FRANKLIN STREET BOSTON MA 02110	Mailing Address 225 FRANKLIN STREET BOSTON MA 02110
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 10/13/1995	
				4. FEI Number 04-2473303	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent ROM, IVAN I FECHTOR, DETWILER & CO., INC. 2255 GLADES ROAD, SUITE 234W BOCA RATON FL 33431		10. Name and Address of New Registered Agent 81 Name Jay Blumenstock 82 Street Address (P.O. Box Number is Not Acceptable) 2255 Glades Road 83 Suite 234W 84 City Boca Raton FL 85 Zip Code 33431	
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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 *Jay Blumenstock* Jay Blumenstock, Branch Manager DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC FECHTOR, SHELDON M 155 FEDERAL STREET BOSTON MA 02110 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PC Fechtor, Sheldon M. 225 Franklin Street Boston, MA 02110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD DETWILER, ROBERT R 155 FEDERAL STREET BOSTON MA 02110 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	SVD Detwiler, Robert R. 225 Franklin Street Boston, MA 02110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVD FECHTOR, RICHARD L 155 FEDERAL STREET BOSTON MA 02110 <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TVD Fechtor, Richard L. 225 Franklin Street Boston, MA 02110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FILER, MARJORIE L 155 FEDERAL STREET BOSTON MA 02110 <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	V Filer, Marjorie L. 225 Franklin Street Boston, MA 02110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUGHES, EDWARD J 155 FEDERAL STREET BOSTON MA 02110 <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	V Hughes, Edward J. 225 Franklin Street Boston, MA 02110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCL0 FRANK, STEPHEN Z 155 FEDERAL STREET BOSTON MA 02110 <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	CCL0 Frank, Stephen Z. 225 Franklin Street Boston, MA 02110 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 attachment with an address

SIGNATURE: *Marjorie L. Filer* MARJORIE L. FILER 3/17/98 617-451-2100

CR2E034 (10/97)