

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

FILED

Mar 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000000122 (9)

1. Corporation Name  
GHG CROSSINGS, INC.



Principal Place of Business

C/O THE GATEHOUSE GROUP, INC.  
313 CONGRESS ST  
BOSTON MA 02210

Mailing Address

C/O THE GATEHOUSE GROUP, INC.  
313 CONGRESS ST  
BOSTON MA 02210-1218

3. Date Incorporated or Qualified  
01/05/1996

3a. Date of Last Report

4. FEI Number

APPLIED FOR 04-3295049

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ATTAWAY, JOHN A JR, ESQ  
LANE, TROHN, CLARKE, BERTRAND, VREELAND  
1 LAKE MORTON DR  
LAKELAND FL 33802-0003

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

(Signature of registered agent or registered agent and wife if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME DP  
STREET ADDRESS PLONSKIER, MARC S  
CITY-ST-ZIP C/O THE GATEHOUSE GROUP, 313 CONGRESS ST  
BOSTON MA 02210

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME DV  
STREET ADDRESS CANEPARI, DAVID S  
CITY-ST-ZIP C/O THE GATEHOUSE GROUP, 313 CONGRESS ST  
BOSTON MA 02210

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME V  
STREET ADDRESS HARRISON, DEAN E  
CITY-ST-ZIP C/O THE GATEHOUSE GROUP, 313 CONGRESS ST  
BOSTON MA 02210

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME AC  
STREET ADDRESS NEUFELD, SARITA D  
CITY-ST-ZIP C/O THE GATEHOUSE GROUP, 313 CONGRESS ST  
BOSTON MA 02210

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME T  
STREET ADDRESS DONOVAN, TIMOTHY M  
CITY-ST-ZIP C/O THE GATEHOUSE GROUP, 313 CONGRESS ST  
BOSTON MA 02210

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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: Timothy M. Donovan, Treasurer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/97  
Date

(617) 345-9300  
Daytime Phone #

CR2E034 (9/96)