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Aug 28 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003923 (7)

1. Corporation Name  
**LIDS CORPORATION OF DELAWARE**

Principal Place of Business

**60 GLACIER DRIVE  
WESTWOOD MA 02090**

Mailing Address

**60 GLACIER DRIVE  
WESTWOOD MA 02090-1818**

3. Date Incorporated or Qualified

**08/01/1996**

3a. Date of Last Report

2. Principal Place of Business

**21**  
Suite, Apt. #, etc.

2a. Mailing Address

**26**  
Suite, Apt. #, etc.

22  
City & State

27  
City & State

23  
Zip Country

28  
Zip Country

24

25

29

30

4. FEI Number

**04-3307902**

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

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

**400002281244--6**

**-08/29/97--01082--006**

**\*\*\*\*\*550.00 FL \*\*\*\*\*550.00**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **PC**  
STREET ADDRESS **KUCINSKI, NANCY B**  
CITY-ST-ZIP **60 GLACIER DRIVE  
WESTWOOD MA 02090**

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **BARCELLO, STEPHEN**  
CITY-ST-ZIP **60 GLACIER DRIVE  
WESTWOOD MA 02090**

TITLE ☐ DELETE  
NAME **S**  
STREET ADDRESS **DAUM, ROSLYN G**  
CITY-ST-ZIP **53 STATE STREET (CHOATE, HALL & STEWART)  
BOSTON MA 02109**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **KARP, STEPHEN**  
CITY-ST-ZIP **ONE WELLS AVENUE (NEW ENGLAND DEVELOPMENT)  
NEWTON MA 02159**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **HALPERN, JOHN D**  
CITY-ST-ZIP **500 BOYLSTON STREET, SUITE 1880  
BOSTON MA 02116**

TITLE ☒ DELETE  
NAME **D**  
STREET ADDRESS **FISCHMAN, STEVEN S**  
CITY-ST-ZIP **ONE WELLS AVENUE (NEW ENGLAND DEVELOPMENT)  
NEWTON MA 02159**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME **D**  
1.3 STREET ADDRESS **CRAIG A. T. JONES**  
1.4 CITY-ST-ZIP **535 MADISON AVENUE  
NEW YORK, NY 10022**

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME **D**  
2.3 STREET ADDRESS **JEFFREY M. HURST**  
2.4 CITY-ST-ZIP **20 WILLIAM STREET  
WELLESLEY, MA 02181**

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME **D**  
3.3 STREET ADDRESS **JANET EMERSON**  
3.4 CITY-ST-ZIP **10 FAWCETT STREET - 2ND FLOOR  
CAMBRIDGE, MA 02138**

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME **P/C/D**  
4.3 STREET ADDRESS **KUCINSKI, NANCY B.**  
4.4 CITY-ST-ZIP **60 GLACIER DRIVE  
WESTWOOD, MA 02090**

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME **D**  
5.3 STREET ADDRESS **WESTERFIELD, STEPHEN**  
5.4 CITY-ST-ZIP **111 9TH STREET, EAST  
ST. PETERSBURG, FL 33715**

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME **D**  
6.3 STREET ADDRESS **GLEASON, PETER**  
6.4 CITY-ST-ZIP **JP MORGAN CAPITAL CORP., 61 WALL ST  
14TH FL., NEW YORK, NY 10260-0060**

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

**Roslyn G. Daum, Secretary**

**8/18/97 617-248-5000**

CR2E034 (9/96)

(2)

ATTACHMENT TO  
1997 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Additional Directors:

Title: D  
Name: CORDOVA, CARL C. III  
Street Address: ELECTRA FLEMMING INC.  
320 PARK AVENUE, 28th FLOOR  
City-ST-Zip NEW YORK, NY 10022

Title: D  
Name: CHADSEY, JACK  
Street Address: 9050 HAMMOCK LAKE LANE DRIVE  
City-ST-Zip CORAL GABLES, FL 33156