

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

FILED

Jun 23 1998 8:00am
Secretary of State

| | | |
|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|

DOCUMENT # **F97 00000 5789**
1. Corporation Name
MEDITRUST CORPORATION

Principal Place of Business Mailing Address

| | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------|------------------------------------|------------------------------------------------------------------------------------|
| 2. Principal Place of Business 21 197 FIRST AVENUE Suite, Apt. #, etc. 22 SUITE 300 City & State 23 NEEDHAM HEIGHTS, MA Zip Country 24 02194-9127 25 USA | | 2a. Mailing Address 26 197 FIRST AVENUE Suite, Apt. #, etc. 27 SUITE 300 City & State 28 NEEDHAM HEIGHTS, MA Zip Country 29 02194-9127 30 USA | | 3. Date Incorporated or Qualified 12/30/87 | 3a. Date of Last Report N/A | 4. FEI Number 95-9520818 | Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> |
| 5. Certificate of Status Desired <input checked="" 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 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

10. Name and Address of Registered Agent

81 Name **The Prentice-Hall Corporation System Inc**
82 Street Address (P.O. Box Number is Not Acceptable)
1201 Hay Street
83 **SUITE 105**
84 City **Tallahassee** FL 85 Zip Code **32301**

Not New
Have Always
Been Registered Agent

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 the filer (if applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE | P/T/D | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BENSON, DAVID F. | 1.2 NAME | |
| STREET ADDRESS | 197 FIRST AVENUE, SUITE 300 | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | NEEDHAM HEIGHTS, MA 02194-9127 | 1.4 CITY-ST-ZIP | |
| TITLE | V/S | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BENJAMIN, MICHAEL S. | 2.2 NAME | |
| STREET ADDRESS | 197 FIRST AVENUE, SUITE 300 | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | NEEDHAM HEIGHTS, MA 02194-9127 | 2.4 CITY-ST-ZIP | |
| TITLE | COO | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BUSHEE, MICHAEL F. | 3.2 NAME | |
| STREET ADDRESS | 197 FIRST AVENUE, SUITE 300 | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | NEEDHAM HEIGHTS, MA 02194-9127 | 3.4 CITY-ST-ZIP | |
| TITLE | CFO | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GERBER, LAURIE T. | 4.2 NAME | |
| STREET ADDRESS | 197 FIRST AVENUE, SUITE 300 | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | NEEDHAM HEIGHTS, MA 02194-9127 | 4.4 CITY-ST-ZIP | |
| TITLE | CONTROLLER | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DEMERRITT, JOHN G. | 5.2 NAME | |
| STREET ADDRESS | 197 FIRST AVENUE, SUITE 300 | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | NEEDHAM HEIGHTS, MA 02194-9127 | 5.4 CITY-ST-ZIP | |
| TITLE | PLEASE SEE ATTACHED LIST | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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:

CONTROLLER 6/16/98 (781) 433-6000

CR2E034 (9/96)

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Officers

1. Full Legal Name: **David F. Benson** **Director**
Title: **President and Treasurer**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
2. Full Legal Name: **Michael S. Benjamin**
Title: **Senior Vice President, Secretary and Corporate Counsel**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
3. Full Legal Name: **Michael F. Bushee**
Title: **Chief Operating Officer**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
4. Full Legal Name: **Laurie T. Gerber**
Title: **Chief Financial Officer**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
5. Full Legal Name: **Stephen C. Mecke**
Title: **Vice President of Development**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
6. Full Legal Name: **Debora A. Pfaff**
Title: **Vice President of Operations**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
7. Full Legal Name: **Stephen H. Press**
Title: **Vice President**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
8. Full Legal Name: **John G. Demeritt**
Title: **Controller**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
9. Full Legal Name: **Richard W. Pomroy**
Title: **Vice President of Property Management**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**
10. Full Legal Name: **John E. Ryan, Jr.**
Title: **Vice President of Acquisitions**
Business Address: **197 First Avenue, Suite 300
Needham Heights, MA 02194**