

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006591

1. Entity Name

GATEHOUSE PROPERTIES, INC.

**FILED**  
**Feb 05, 2000 8:00 am**  
**Secretary of State**

02-05-2000 90025 028 \*\*\*150.00

Principal Place of Business 313 CONGRESS STREET BOSTON MA 02210	Mailing Address 313 CONGRESS STREET BOSTON MA 02210-1218
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. <i>C/o The Gatehouse Group</i> City & State	3. Mailing Address Suite, Apt. #, etc. <i>C/o The Gatehouse Group</i> City & State
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4. FEI Number <b>05-0432844</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

~~CANAPARI, DAVID J.~~  
**STEARNS, WEAVER, MILLER, WESSLER**  
**150 WEST FLAGLER STREET SUITE 2200**  
**MIAMI FL 33130**

7. Name and Address of New Registered Agent

Name: **BRIAN J. McDONOUGH, ESQ.**  
 Street Address (P.O. Box Number is Not Acceptable)  
 City: **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PST</b> <b>CANAPARI, DAVID J</b> <b>313 CONGRESS STREET</b> <b>BOSTON MA 02210</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ~~Signature Required~~  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**David J. Canepari, President**  
 Date: **1/7/2000** Daytime Phone #: **(617) 345-9**