

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Jul 31 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # L18476 (6)  
 1. Corporation Name  
 PALM EAST DEVELOPMENT CORP.



Principal Place of Business  
 100 FEDERAL STREET  
 01-19-03  
 BOSTON MA 02110  
 US

Mailing Address  
 100 FEDERAL STREET  
 01-19-03  
 BOSTON MA 02110  
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
 09/26/1989

2. Principal Place of Business  
 21  
 Suite, Apt. #, etc.  
 22  
 City & State  
 23  
 Zip  
 24  
 Country  
 25

2a. Mailing Address  
 26  
 Suite, Apt. #, etc.  
 27  
 City & State  
 28  
 Zip  
 29  
 Country  
 30

4. FEI Number  
 04-3066158  
 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 owes or has paid the current year Intangible Personal Property Tax due June 30.  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  
 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DUCKETT, DENNIS J	
STREET ADDRESS	100 FEDERAL ST.	
CITY-ST-ZIP	BOSTON MA	
TITLE	C	<input type="checkbox"/> DELETE
NAME	HUDSON, STEVEN P.	
STREET ADDRESS	100 FEDERAL STREET	
CITY-ST-ZIP	BOSTON MA	
TITLE	AC	<input type="checkbox"/> DELETE
NAME	BALLOU, E FAYE	
STREET ADDRESS	100 FEDERAL STREET	
CITY-ST-ZIP	BOSTON MA	
TITLE	T	<input type="checkbox"/> DELETE
NAME	NORMAN, AMY L	
STREET ADDRESS	100 FEDERAL ST.	
CITY-ST-ZIP	BOSTON MA	
TITLE	AT	<input checked="" type="checkbox"/> DELETE
NAME	HARTMANN, ROBERT J.	
STREET ADDRESS	100 FEDERAL ST.	
CITY-ST-ZIP	BOSTON MA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GUINEY, ALICE M.	
STREET ADDRESS	100 FEDERAL STREET	
CITY-ST-ZIP	BOSTON MA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Christopher Canniff	
1.3 STREET ADDRESS	100 Federal Street	
1.4 CITY-ST-ZIP	Boston, MA 02110	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Michael R. Garfield	
2.3 STREET ADDRESS	100 Federal Street	
2.4 CITY-ST-ZIP	Boston, MA 02110	
3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Marvin A. Westphal	
3.3 STREET ADDRESS	100 Federal Street	
3.4 CITY-ST-ZIP	Boston, MA 02110	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	800002605528	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	-08/03/98--01092--007	
5.4 CITY-ST-ZIP	***150.00	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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: \_\_\_\_\_ 7/15/98 617 434 3800

CR2E034 (5/98)

FE 7-31

BankBoston, N.A.  
100 Federal Street  
Boston, Massachusetts 02106



*PSJ*

July 20, 1998

Division of Corporations  
Annual Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Palm East Development Corp.  
Document # L18476

Gentlemen:

Enclosed please find our check in the amount of \$150.00 and the 1998 Annual Report for Palm East Development Corp. Please note that the \$400.00 late fee is not included since the first notice of the report was never received by this office.

If you have any questions, please contact me at 617 434-2899.

Sincerely,

A handwritten signature in cursive script, appearing to read "E. Faye Ballou".

E. Faye Ballou  
Assistant Clerk

enclosure