

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).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Sep 01 1998 8:00am
Secretary of State

DOCUMENT # L63045 (3)
1. Corporation Name
SWF TAMPA REALTY DEVELOPMENT CORP.



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

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

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/06/1990	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		04-3087373	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	<input type="checkbox"/> DELETE		1.1 TITLE	AC	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GUINEY, ALICE M.			1.2 NAME	E. Faye Ballou		
STREET ADDRESS	100 FEDERAL STREET			1.3 STREET ADDRESS	100 Federal Street		
CITY-ST-ZIP	BOSTON MA			1.4 CITY-ST-ZIP	Boston, MA 02110		
TITLE	T	<input type="checkbox"/> DELETE		2.1 TITLE	AT	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	NORMAN, AMY L.			2.2 NAME	Christopher Canniff		
STREET ADDRESS	100 FEDERAL STREET			2.3 STREET ADDRESS	100 Federal Street		
CITY-ST-ZIP	BOSTON MA			2.4 CITY-ST-ZIP	Boston, MA 02110		
TITLE	VD	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	V	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WESTPHAL, MARVIN A			3.2 NAME	Marvin A. Westphal		
STREET ADDRESS	100 FEDERAL STREET			3.3 STREET ADDRESS	100 Federal Street		
CITY-ST-ZIP	BOSTON MA			3.4 CITY-ST-ZIP	Boston, MA 02110		
TITLE	C	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HUDSON, STEVEN P.			4.2 NAME			
STREET ADDRESS	100 FEDERAL STREET			4.3 STREET ADDRESS			
CITY-ST-ZIP	BOSTON MA			4.4 CITY-ST-ZIP			
TITLE	C	<input checked="" type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BALLOU, E. FAYE			5.2 NAME	700002632037		
STREET ADDRESS	100 FEDERAL STREET			5.3 STREET ADDRESS	-09/04/98--01047--029		
CITY-ST-ZIP	BOSTON MA			5.4 CITY-ST-ZIP	***550.00		
TITLE	AT	<input checked="" type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HARTMANN, ROBERT J.			6.2 NAME			
STREET ADDRESS	100 FEDERAL STREET			6.3 STREET ADDRESS			
CITY-ST-ZIP	BOSTON MA			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 in an attachment with an address.

SIGNATURE:

E. Faye Ballou, Assistant Clerk

7/30/98

617 434-2899

CR2E034 (5/98)

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



August 20, 1998

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

RE: SWF Tampa Realty Development Corp.

Gentlemen:

Enclosed please find our check in the amount of \$550.00 and the 1998 Annual Report for SWF Tampa Realty Development Corp. Please note that the \$400.00 late fee is included with this annual report (unlike the other annual reports in this envelope) since your office did forward the first notice annual report for this subsidiary.

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

Sincerely,

E. Faye Ballou
Assistant Clerk

enclosures