

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

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M59852** (7)
1. Corporation Name
VAC REALTY, INC.

Principal Place of Business VAC REALTY INC. 2348 PINELANE AVE. NAPLES FL 33962 US	Mailing Address VAC REALTY INC. 10 RUTGERS ROAD ANDOVER MA 01810 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt #, etc 22 [REDACTED] 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt #, etc 27 City & State 28 Zip Country 29 30		3. Date Incorporated or Qualified 09/29/1987	4. FEI Number 65-0026383 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 GUALARIO, JAMES M P.A. 820 ANCHOR RODE DR. NAPLES FL 33940				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	
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SDC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHASAIWALA, CHANDRAK	1.2 NAME	
STREET ADDRESS	10 RUTGERS ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ANDOVER MA 01810	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHASAIWALA, ASHA C	2.2 NAME	
STREET ADDRESS	10 RUTGERS ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	ANDOVER MA 01810	2.4 CITY-ST-ZIP	
TITLE	VPD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHASAIWALA, VAIBHAV C	3.2 NAME	
STREET ADDRESS	10 RUTGERS ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ANDOVER MA 01810	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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 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: *Khassaiwala* 3-5-98 (978) 453 6720

CP2E034 (1097)