

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

DOCUMENT # M99000000803

1. Entity Name
NEW MEDITRUST COMPANY LLC

00 MAY 30 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
197 FIRST AVENUE
NEEDHAM MA 02494

Mailing Address
197 FIRST AVENUE
NEEDHAM MA 02494-2612

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
04-3465697 APPLIED FOR

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name
Street Address (P.O. Box Number is Not Acceptable)
600003293126--7
-06/16/00--01004--012
*****50.00 *****50.00
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME BENSON, DAVID F
STREET ADDRESS 197 FIRST AVENUE
CITY-ST-ZIP NEEDHAM MA 02494 ☒ Delete

TITLE PRESIDENT & CEO
NAME FRANCIS W. CASH
STREET ADDRESS 197 FIRST AVENUE, SUITE 300
CITY-ST-ZIP NEEDHAM HEIGHTS, MA 02494 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE CFO & TREASURER
NAME LAURIE T. GERBER
STREET ADDRESS 197 FIRST AVENUE
CITY-ST-ZIP NEEDHAM HEIGHTS, MA 02494 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE MGR
NAME CHIEF OPERATING OFFICER
STREET ADDRESS MICHAEL F. BUSHEE
CITY-ST-ZIP 197 FIRST AVENUE, SUITE 300
NEEDHAM HEIGHTS, MA 02494 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE MGR
NAME SECRETARY & MANAGER
STREET ADDRESS MICHAEL S. BENJAMIN
CITY-ST-ZIP 197 FIRST AVENUE, SUITE 300
NEEDHAM HEIGHTS, MA 02494 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL S. BENJAMIN 4/27/2000 781-433-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #