

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000005551

FILED
Nov 10, 2005
Secretary of State

Entity Name: MWH #14 CORPORATION

Current Principal Place of Business:

C/O TA ASSOCIATES REALTY
28 STATE STREET
BOSTON, MA 02109

New Principal Place of Business:

Current Mailing Address:

C/O TA ASSOCIATES REALTY
28 STATE STREET
BOSTON, MA 02109

New Mailing Address:

FEI Number: 58-2417788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: LAURA R. DUNLAP

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCP () Delete
Name: RUANE, MICHAEL A
Address: 28 STATE STREET, 10TH FLOOR
City-St-Zip: BOSTON, MA 02109

Title: AS () Delete
Name: MAGNO, KAREN
Address: 28 STATE STREET, 10TH FLOOR
City-St-Zip: BOSTON, MA 02109

Title: DV (X) Delete
Name: HARMELING, MARK M
Address: 28 STATE STREET 10TH FL
City-St-Zip: BOSTON, MA 02109

Title: VTS (X) Delete
Name: EGAN, RICHARD G JR
Address: 28 STATE STREET 10TH FL
City-St-Zip: BOSTON, MA 02109

Title: V (X) Delete
Name: BRAUER, HENRY
Address: 28 STATE STREET 10TH FL
City-St-Zip: BOSTON, MA 02109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTS (X) Change () Addition
Name: EGAN, RICHARD G JR.
Address: 28 STATE STREET 10TH FL
City-St-Zip: BOSTON, MA 02109 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL A. RUANE

P

11/10/2005

Electronic Signature of Signing Officer or Director

Date