

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90039 031 ***150.00

DOCUMENT # P18411

1. Entity Name
BOSE CORPORATION



Principal Place of Business
**THE CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON, DE 19801**

Mailing Address
**THE CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON, DE 19801**

54013620



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02272004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

04-2655386

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME COLEMAN, JOHN T
STREET ADDRESS 1 GREENWOOD ROAD
CITY-ST-ZIP HOPKINTON, MA 01748

TITLE ☒ Change ☐ Addition
NAME **The Mountain**
STREET ADDRESS **Framingham, MA 01701-9168**
CITY-ST-ZIP

TITLE V ☐ Delete
NAME GRADY, DANIEL A.
STREET ADDRESS 50 CHAMBERLAIN AVE
CITY-ST-ZIP WESTWOOD, MA

TITLE ☒ Change ☐ Addition
NAME **Same As Above**
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME SWANSON, WILLIAM R.
STREET ADDRESS 4 FISKE ROAD
CITY-ST-ZIP WELLESLEY, MA

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

TITLE S ☐ Delete
NAME BERNHARD, ALEXANDER A.
STREET ADDRESS 38 CEDAR LN WAY
CITY-ST-ZIP BOSTON, MA

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

TITLE AS ☐ Delete
NAME SULLIVAN, MARK E.
STREET ADDRESS 722 JERUSALEM ROAD
CITY-ST-ZIP COHASSET, MA

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

TITLE D ☐ Delete
NAME BOSE, AMAR G.
STREET ADDRESS 17 DEER RUN
CITY-ST-ZIP WAYLAND, MA

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

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **H.W. Batchelder** **Herbert W. Batchelder (508) 746-7537**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
2-27-04