

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P22053

1. Entity Name

HG LAND CO., INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90416 040 ***150.00

Principal Place of Business

27 BOYLSTON STREET
CHESTNUT HILL MA 02167

Mailing Address

27 BOYLSTON STREET
CHESTNUT HILL MA 02167

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

02467

Country

Zip

02467

Country

4. FEI Number 04-3016067

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VD ☐ Delete
NAME KNEZ, BRIAN J
STREET ADDRESS 27 BOYLSTON STREET
CITY-ST-ZIP CHESTNUT HILL MA

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

TITLE AS ☐ Delete
NAME BAYERS, WILLIAM F
STREET ADDRESS 27 BOYLSTON STREET
CITY-ST-ZIP CHESTNUT HILL MA

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

TITLE VD ☐ Delete
NAME ROBERT A. SMITH
STREET ADDRESS 27 BOYLSTON STREET
CITY-ST-ZIP CHESTNUT HILL MA

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

TITLE TV ☐ Delete
NAME GIBBONS, PAUL F.
STREET ADDRESS 27 BOYLSTON STREET
CITY-ST-ZIP CHESTNUT HILL MA

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

TITLE SV ☐ Delete
NAME GELLER, ERIC P.
STREET ADDRESS 27 BOYLSTON STREET
CITY-ST-ZIP CHESTNUT HILL MA

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

TITLE PD ☐ Delete
NAME SMITH, RICHARD A.
STREET ADDRESS 27 BOYLSTON STREET
CITY-ST-ZIP CHESTNUT HILL MA

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL F. GIBBONS

Date

4/20/01

Daytime Phone #

617-282-8200

CR2E034 (10/00)