2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23166

FILED Jan 07, 2008 Secretary of State

Entity Name: BOSTON CAPITAL SECURITIES, INC.

Current Principal Place of Business:			New Principal	New Principal Place of Business:	
	TON PLACE MA 02108				
current Mailing Address:			New Mailing A	New Mailing Address:	
	TON PLACE MA 02108				
El Number	: 04-2802043 F	El Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
ame and	l Address of Curr	ent Registered Agent:	Name and Add	ress of New Registered Agent:	
201 HAY	ATION SERVICE (S STREET SSEE, FL 32301	COMPANY			
	e named entity suble e of Florida.	mits this statement for the purp	pose of changing its reg	gistered office or registered agent, or both,	
GNATUI		55 : 10			
		Signature of Registered Agent		Date	
ction Ca	mpaign Financing Tru	ust Fund Contribution ().			
FFICER	S AND DIRECTO	RS:	ADDITIONS/CH	IANGES TO OFFICERS AND DIRECTOR	
le: me:	P () Del DEAGAZIO, RICHAR	SD 1	Title: Name:	() Change () Addition	
dress:	ONE BOSTON PLACE BOSTON, MA 0210		Address: City-St-Zip:		
dress: y-St-Zip: le: me: dress: y-St-Zip:		8 ete C CE		()Change ()Addition	
dress: y-St-Zip: e: me: dress:	BOSTON, MA 0210 VP () Deli CHANDLER, FRANK ONE BOSTON PLACE	8 ete C DE 8 ete	City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress:	BOSTON, MA 0210 VP () Deli CHANDLER, FRANK ONE BOSTON PLACE BOSTON, MA 0210 CLER () Deli TEAL, MARC N ONE BOSTON PLACE	ete CDE 8 ete CE 8 ete CE	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		
dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: dress:	BOSTON, MA 0210 VP () Del- CHANDLER, FRANK- ONE BOSTON PLACE BOSTON, MA 0210 CLER () Del- TEAL, MARC N ONE BOSTON PLACE BOSTON, MA 0210 T () Del- TEAL, MARC N ONE BOSTON PLACE	ete CE 8 ete CE 8 ete CE 8 ete CE 8 ete	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	()Change ()Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD J DEAGAZIO PRES 01/07/2008