

# FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P24870 (8)**

1. Corporation Name

**BOCA 108 CORP.**

Principal Place of Business

**100 FEDERAL ST  
01-34-02RAL ST  
BOSTON MA 02110  
US**

Mailing Address

**C/O STEVE HUDSON  
100 FEDERAL STREET  
BOSTON MA 02110  
US**



3. Date Incorporated or Qualified  
**06/20/1989**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business  
21 **100 Federal Street**

2a. Mailing Address  
26 **100 Federal Street**

4. FEI Number  
**04-3027383**

Applied For  
Not Applicable

Suite, Apt. #, etc.  
22 **01-19-03**

Suite, Apt. #, etc.  
27 **01-19-03**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State  
23 **Boston, MA**

City & State  
28 **Boston, MA**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip  
24 **02110**

Country  
25 **USA**

Zip  
29 **02110**

Country  
30 **USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

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

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE  
NAME **DUCKETT, DENNIS J**  
STREET ADDRESS **100 FEDERAL STREET**  
CITY-ST-ZIP **BOSTON MA**

1.1 TITLE **Clerk** ☐ Change ☒ Addition  
1.2 NAME **Michael R. Garfield**  
1.3 STREET ADDRESS **100 Federal Street**  
1.4 CITY-ST-ZIP **Boston, MA 02110**

TITLE **VP/D** ☐ DELETE  
NAME **WESTPHAL, MARVIN A**  
STREET ADDRESS **100 FEDERAL STREET**  
CITY-ST-ZIP **BOSTON MA**

2.1 TITLE **Asst. Clerk** ☐ Change ☒ Addition  
2.2 NAME **E. Faye Ballou**  
2.3 STREET ADDRESS **100 Federal Street**  
2.4 CITY-ST-ZIP **Boston, MA 02110**

TITLE **DV** ☒ DELETE  
NAME **QUELETTE, DANIELS R**  
STREET ADDRESS **100 FEDERAL STREET**  
CITY-ST-ZIP **BOSTON MA**

3.1 TITLE **D/VP** ☐ Change ☒ Addition  
3.2 NAME **Alice M. Guiney**  
3.3 STREET ADDRESS **100 Federal Street**  
3.4 CITY-ST-ZIP **Boston, MA 02110**

TITLE **T** ☐ DELETE  
NAME **NORMAN, AMY L**  
STREET ADDRESS **100 FEDERAL STREET**  
CITY-ST-ZIP **BOSTON MA**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **AT** ☐ DELETE  
NAME **HARTMANN, ROBERT J.**  
STREET ADDRESS **100 FEDERAL STREET**  
CITY-ST-ZIP **BOSTON MA**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE **AS** ☒ DELETE  
NAME **HUDSON, STEVEN P**  
STREET ADDRESS **100 FEDERAL STREET**  
CITY-ST-ZIP **BOSTON MA**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Michael R. Garfield**

**April 24, 1996**

**617-434-7602**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)