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Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P24870** (8)
1. Corporation Name
BOCA 108 CORP.



Principal Place of Business 100 FEDERAL ST 01-1903 BOSTON MA 02110 US	Mailing Address C/O STEVE HUDSON 01-1903 BOSTON MA 02110 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/20/1989	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 04-3027383	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81	Name	84	City
82	Street Address (P.O. Box Number is Not Acceptable)	85	Zip Code
83		FL	

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 filed if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Assistant Treasurer
NAME	DUCKETT, DENNIS J	1.2 NAME	Sean A. King
STREET ADDRESS	100 FEDERAL STREET	1.3 STREET ADDRESS	100 Federal Street
CITY-ST-ZIP	BOSTON MA	1.4 CITY-ST-ZIP	Boston, MA 02110
TITLE	C	2.1 TITLE	Assistant Clerk
NAME	GARFIELD, MICHAEL R	2.2 NAME	E. Faye Ballou
STREET ADDRESS	100 FEDERAL STREET	2.3 STREET ADDRESS	100 Federal Street
CITY-ST-ZIP	BOSTON MA 02110	2.4 CITY-ST-ZIP	Boston, MA 02110
TITLE	DV	3.1 TITLE	
NAME	GUINEY, ALICE M.	3.2 NAME	
STREET ADDRESS	100 FEDERAL STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	NORMAN, AMY L	4.2 NAME	
STREET ADDRESS	100 FEDERAL STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA	4.4 CITY-ST-ZIP	
TITLE	AT	5.1 TITLE	
NAME	HARTMANN, ROBERT J.	5.2 NAME	
STREET ADDRESS	100 FEDERAL STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA	5.4 CITY-ST-ZIP	
TITLE	C	6.1 TITLE	
NAME	GARFIELD, MICHAEL R.	6.2 NAME	
STREET ADDRESS	100 FEDERAL STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA	6.4 CITY-ST-ZIP	

14. 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 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 *E. Faye Ballou* **E. Faye Ballou, Assistant Clerk 2/11/98 617 434-2899**

CR2E034 (10/97)