

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

P31520

BCP LONDON ARMS, INC.

Principal Place of Business

One Boston Place
Suite 2100
Boston, MA 02108
US

Mailing Address

One Boston Place
Suite 2100
Boston, MA 02108
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/25/90

4. FET Number
04-3066486

Applied For
Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

Country

24. Zip

25. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

10. Name and Address of New Registered Agent

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 607.0507 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 of person who is authorized to execute this statement)

(Not: If Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME Christopher W. Collins
STREET ADDRESS 72 Harbor Street
CITY-ST-ZIP Manchester, MA

☐ DELETE

TITLE C
NAME Patricia Stone
STREET ADDRESS 10 Emerson Place, Boston MA
CITY-ST-ZIP

☐ DELETE

TITLE T
NAME Anthony A. Nickas
STREET ADDRESS 20 Old Planters Road
CITY-ST-ZIP Beverly, MA 01915

☐ DELETE

TITLE
NAME Jeff N. Goldstein
STREET ADDRESS 421 Marlborough St.
CITY-ST-ZIP Boston, MA

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY-ST-ZIP

☐ Change ☐ Addition

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

☐ Change ☐ Addition

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY-ST-ZIP

☐ Change ☐ Addition

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY-ST-ZIP

☐ Change ☐ Addition

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY-ST-ZIP

☐ Change ☐ Addition

61. TITLE
62. NAME
63. STREET ADDRESS
64. 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 applicable 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 registered agent of the corporation; and that my name appears in Block 12 or Block 13 if changed, or in a new block if added with an effect.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/98

DATE DAY OF MONTH YEAR

CR2E034 (10/97)