

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P38083

1. Entity Name

J. ROBERT SCOTT, INC.

FILED

00 JAN 19 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
82 DEVONSHIRE STREET
MAILZONE F7D
BOSTON MA 02109

Mailing Address
82 DEVONSHIRE STREET
MAILZONE F7D
BOSTON MA 02109-3605



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 04-2898922

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 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 reinstating)

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, 2000 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 DCEO
NAME HILTON, TIMOTHY T ☒ Delete
STREET ADDRESS 82 DEVONSHIRE STREET
CITY-ST-ZIP BOSTON MA 02109

TITLE DC ☐ Change ☒ Addition
NAME Steven P. Akin
STREET ADDRESS 82 Devonshire Street
CITY-ST-ZIP Boston, MA 02109

TITLE DP ☐ Delete
NAME HOLODNAK, WILLIAM
STREET ADDRESS 82 DEVONSHIRE STREET
CITY-ST-ZIP BOSTON MA 02109

TITLE D ☐ Change ☒ Addition
NAME Laurel M. Watts
STREET ADDRESS 82 Devonshire Street
CITY-ST-ZIP Boston, MA 02109

TITLE V ☐ Delete
NAME JOHNSON, ELIZABETH L
STREET ADDRESS 82 DEVONSHIRE STREET
CITY-ST-ZIP BOSTON MA 02109

TITLE T ☐ Change ☒ Addition
NAME Michael B. Fox
STREET ADDRESS 82 Devonshire Street
CITY-ST-ZIP Boston, MA 02109

TITLE T ☒ Delete
NAME MANNING, STEPHEN G
STREET ADDRESS 82 DEVONSHIRE STREET
CITY-ST-ZIP BOSTON MA 02109

TITLE Assistant C ☐ Change ☒ Addition
NAME Susan Englander Hislop
STREET ADDRESS 82 Devonshire Street
CITY-ST-ZIP Boston, MA 02109

TITLE AT ☐ Delete
NAME GREENSTEIN, GARY
STREET ADDRESS 82 DEVONSHIRE STREET
CITY-ST-ZIP BOSTON MA 02109

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

TITLE SC ☐ Delete
NAME FREEDMAN, JAY
STREET ADDRESS 82 DEVONSHIRE STREET
CITY-ST-ZIP BOSTON MA 02109

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

400003114924-4
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****150.00 ****150.00

SP

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:

JAY FREEDMAN, Clerk

1/10/00

617-563-8515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #