

10/17/2006 14:28 16174280922

CT CORP

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2006 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # P93000082921			
1. Entity Name ST. MARY'S AFFORDABLE HOUSING, INC.			
Principal Place of Business 101 ARCH STREET 13 FLOOR BOSTON, MA 02110 US		Mailing Address 101 ARCH STREET 13 FLOOR BOSTON, MA 02110 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FBI Number 59-3200325		Applied For Not Applicable	
5. Certificate of Status Desired		Additional Fee Required \$6.75	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent 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. I am familiar with, and accept, the obligations of registered agents. SIGNATURE <u>Traci Houck</u> TRACI HOUCK SPECIAL ASSISTANT SECRETARY DATE <u>10/17/06</u> (Signature, typed or printed name of registered agent and title if applicable) (NOTES: Registered Agent signature required when reinstating)			
FILE NOW!! FEB IS \$750.00 After January 1, 2007, Fee will be \$800.00			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLADSTONE, MICHAEL H 101 ARCH STREET BOSTON, MA 02110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Michael H. Gladstone</u>		Michael H. Gladstone, 10/16/06 (617) 439-3911	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Name Phone #	

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Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

ST. MARY'S AFFORDABLE HOUSING, INC.

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