

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

FILED
Sep 21, 2001 8:00 am
Secretary of State
09-21-2001 90002 047 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1996 2001	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **944000019139**
1. Corporation Name

11 HIGH STREET INC.

C0077054

Principal Place of Business 11 HIGH ST., Suffield, Conn. 06078	Mailing Address 11 HIGH ST., INC. 169 GODFREY RD.
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2. Principal Place of Business 21 11 HIGH ST., Suite, Apt. #, etc.	2a. Mailing Address 26 169 GODFREY RD. Suite, Apt. #, etc.
22 Suffield, Conn. City & State	27 Ludlow, VT. City & State
23 06078 Zip	28 05149 Zip
24 HTFD. Country	29 WINDSOR Country

3. Date Incorporated or Qualified 65-0474420	3a. Date of Last Report 4-24-00
4. FEI Number 65-0474420	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ATTY. GARY HAUSLER 950 N COLLIER BLVD., SUITE 202 MARCO ISLAND, FLA. 34145	
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10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ST. BERRIERA, KELLY	1.2 NAME	
STREET ADDRESS	SEASON PLACE,	1.3 STREET ADDRESS	
CITY-ST-ZIP	DORCHESTER, MASS. 02035	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P. GLYNN, BRIAN R.	2.2 NAME	
STREET ADDRESS	1689 VILLA CT.,	2.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND, FLA. 34145	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Brian R. Glynn** **9/10/01** **802-228-8794**
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

Attachment Doc# P94000019139 - CORP 1054

State of Florida



Department of State

I certify from the records of this office that 11 HIGH STREET, INC. is a corporation organized under the laws of the State of Florida, filed on March 7, 1994

The document number of this corporation is P94000019139.

I further certify that said corporation has paid all fees due this office through December 31, 2000, that its most recent annual report/uniform business report was filed on May 15, 2000, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.



CR2EO22 (1-99)

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capitol, this the
Eighteenth day of May, 2000

Katherine Harris

Katherine Harris
Secretary of State



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

Attachment Doc#
P94000019139
CWM054
May 18, 2000

11 HIGH STREET, INC.
PO BOX 182
LUDLOW, VT 05149 US

SUBJECT: 11 HIGH STREET, INC.
DOCUMENT NUMBER: P94000019139

In compliance with the request on your 2000 Annual Report/Uniform Business Report, the certificate of status for the subject corporation is enclosed.

Should you have any questions regarding this matter, please telephone (850) 488-9000.

Division of Corporations

Attachment Doc# P44000019139

Secretary of State.

COORD 1054

409 E Gaines St.,

Tallahassee, Fla. 32399

To whom it may concern -

I did not nor did my registered agent receive an application to re-activate for 2001 my annual report.

I have completed an application on an older form, but was told by you if it would be acceptable if all information was completed.

Please find a check for \$150.00 + \$8.75 per extensions for you as employer "Nathan".

Thank you for your cooperation in this matter and am sorry for any inconvenience.

Brian R. Glynn

BRIAN R. GLYNN

P.S. Reason for not receiving application is our mailing address was changed from P.O. Box to a street address - over 1 yr. ago -