

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104209

FILED
Jan 08, 2004
Secretary of State

Entity Name: LEPANTO REALTY CORP.

Current Principal Place of Business:

131 MESSINA DRIVE
BRAintree, MA 02184

New Principal Place of Business:

Current Mailing Address:

131 MESSINA DRIVE
BRAintree, MA 02184

New Mailing Address:

FEI Number: 04-3345702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LEWIS, KENNETH G
Address: 232 SUMMIT STREET
City-St-Zip: BROOKLINE, MA

Title: T () Delete
Name: OAKLEY, JOHN
Address: 18 PLANTATION ROAD
City-St-Zip: MANSFIELD, MA

Title: D () Delete
Name: DEMATTEO, KAREN
Address: 14 MARRCREST DRIVE
City-St-Zip: MILTON, MA

Title: D () Delete
Name: DEMATTEO, MARTIN J
Address: 88 PLEASANT STREET
City-St-Zip: MILTON, MA 02186

Title: S () Delete
Name: GRANDE, JACQUELINE
Address: 469 CENTER ST.
City-St-Zip: MILTON, MA 02186

Title: PD () Delete
Name: DEMATTEO, JOHN II
Address: 30 ALBION RD
City-St-Zip: WELLESLEY, MA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN OAKLEY

_____ Electronic Signature of Signing Officer or Director

T

01/08/2004

_____ Date