Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_ Filing Period: January 1-March 1 • Filing Fee: \$50.00 2003

401-222-3040

(FORM MUST BE TYPED OR PRIN					
1. Corporate ID No. 87400	2. Name of Corpo				
3. Street Address Principal Business		elopment Corp.	<b>c</b> City	State	Zip
1234 Boylston S		5. State of Incorporation	Chestnut Hill	MA	02467 6. SIC Code
617-232-9850 7. Brief Description of the Characte	r of Business Conducted	RHODE ISLA!	ND		5710
Real estate dev 8. NAMES AND ADDRES President Name	•	-	ACHMENT) FILL IN SPACES B  Vice President Name	EFORE USING ATTAC	HMENTS
Fredric H. Margolis  Street Address c/o The Growth Companies  1234 Boylston Street			N/A Street Address		
City	State	Zip	City	State	Zip
Chestnut Hill Secretary Name	MA	02467	Treasurer Name		•
Fredric H. Margolis Street Address			Fredric H. Margolis Street Address		
as above City	State	Zip	as above <sup>City</sup>	State	Zip
9. NAMES AND ADDRES Director Name	SES OF THE DIR	ECTORS ("X" BOX FOR A	TTACHMENT) FILL IN SPACES  Director Name	BEFORE USING ATTA	CHMENTS
Fredric H. Marg Street Address	olis		Street Address		
as above	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES		
lumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 \$1.00 PAR VALUE			100	Common	\$1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

ile Date:	2-13-63
heck No.: _	(0
'y:	kene

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein fe true and correct. Signature of Officer Date

Fredric H. Margolis Print or Type Name of Officer

President

Title of Officer **c**∰⊃ 5

Form 630 12/02