

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.**  
**AMOUNT DUE BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED  
AND  
FILED

*RJ. 10/2*

97 SEP -5 PM 1:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # P11055 (1)**  
 1. Corporation Name  
**THE FORTRESS CORPORATION**



Principal Place of Business <b>ONE DESIGN CENTER PLACE SUITE 715 BOSTON MA 32210-2313</b>	Mailing Address <b>ONE DESIGN CENTER PLACE SUITE 715 BOSTON MA 32210-2313</b>
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip	24 02210	25	29 02210	30
---	--	----------	----	----------	----

3. Date Incorporated or Qualified <b>08/07/1986</b>	3a. Date of Last Report <b>07/16/1996</b>
4. FEI Number <b>59-2519700</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**LEVIS, JAMES N.  
 1630 N.E. 1ST AVE.  
 MIAMI FL 33132**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83 **000002287610--6**  
**-09/08/97--01153--004**  
 84 City **\*\*\*558.75 FL \*\*\*558.75**

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 <b>DP</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>LEVIS, JAMES N.</b>		1.2 NAME <b>LEVIS, JAMES N.</b>	
STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>		1.3 STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>	
CITY-ST-ZIP <b>BOSTON MA 32210-2313</b>		1.4 CITY-ST-ZIP <b>BOSTON MA 02210-2313</b>	
TITLE <b>TS</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>TS</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HOLLER, DENIS H.</b>		2.2 NAME <b>HOLLER, DENIS M.</b>	
STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>		2.3 STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>	
CITY-ST-ZIP <b>BOSTON MA 32210-2313</b>		2.4 CITY-ST-ZIP <b>BOSTON MA 02210-2313</b>	
TITLE <b>DV</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>DV</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>LEVIS-THORNE, LADD M.</b>		3.2 NAME <b>LEVIS-THORNE, LADD M.</b>	
STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>		3.3 STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>	
CITY-ST-ZIP <b>BOSTON MA 32210-2313</b>		3.4 CITY-ST-ZIP <b>BOSTON MA 02210-2313</b>	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>BARNES, STEVE</b>		4.2 NAME <b>SNYDER, WILLIAM R.</b>	
STREET ADDRESS <b>2 COPLEY PLACE</b>		4.3 STREET ADDRESS <b>ONE DESIGN CENTER PLACE #715</b>	
CITY-ST-ZIP <b>BOSTON MA 02116</b>		4.4 CITY-ST-ZIP <b>BOSTON MA 02210-2313</b>	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME <b>O'CONNELL DAN</b>	
STREET ADDRESS		5.3 STREET ADDRESS <b>5133 NW 93rd DORAL WAY</b>	
CITY-ST-ZIP		5.4 CITY-ST-ZIP <b>MIAMI FL 33178</b>	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME <b>WORRELL, PETE</b>	
STREET ADDRESS		6.3 STREET ADDRESS <b>ONE HARBOUR PLACE</b>	
CITY-ST-ZIP		6.4 CITY-ST-ZIP <b>PORTSMOUTH NH 03801</b>	

14. I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_

9/3/97 617-790-3070

*A. Adams*  
9/5/97

CR2E034 (4/97)

pg. 2 of 2

THE FORTRESS CORPORATION  
DOCUMENT # P11055

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	ADDITION
NAME	WYNNE, FRED	
ADDRESS	811 WILLIAM HILTON PARKWAY	
CITY	ST HILTON HEAD NC 29928	