

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Mar 18 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P40124 (0)**  
 1. Corporation Name  
**MAC-GRAY CO., INC.**

Principal Place of Business <b>22 WATER STREET CAMBRIDGE MA 02141</b>	Mailing Address <b>22 WATER STREET CAMBRIDGE MA 02141-1228</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>08/14/1992</b>	3a. Date of Last Report <b>07/12/1996</b>
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number <b>04-2151044</b>	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. Country	29. Country	30. 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 <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324</b>		10. Name and Address of New Registered Agent	
81. Name			
82. Street Address (P.O. Box Number is Not Acceptable)			
83.			
84. City	<b>FL</b>	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	DP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHAW, DONALD M.</b>	1.2 NAME	
STREET ADDRESS	<b>22 WATER ST. CAMBRIDGE MA</b>	1.3 STREET ADDRESS	<b>SFE ATTACHED LISTS</b>
CITY, ST, ZIP		1.4 CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MACDONALD, STEWART G., JR</b>	2.2 NAME	
STREET ADDRESS	<b>22 WATER ST. CAMBRIDGE MA</b>	2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MACDONALD, SANDRA E</b>	3.2 NAME	
STREET ADDRESS	<b>2 BAILEY HILL RD NATICK MA</b>	3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MACLELLAN, NEIL F.</b>	4.2 NAME	
STREET ADDRESS	<b>22 WATER ST. CAMBRIDGE MA</b>	4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MACLELLAN, NEIL F</b>	5.2 NAME	
STREET ADDRESS	<b>84 AUDOBON RD WALPOLE MA</b>	5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NAPOLITANO, ALBERT A.</b>	6.2 NAME	
STREET ADDRESS	<b>111 COLUMBIA RD. ARLINGTON MA</b>	6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY-ST-ZIP	

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 contained 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: *Neil F. MacLellan* **3/5/97**  
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**Mac-Gray Co., Inc.**  
**Corporate Officers**  
**Tax ID # 04-2151044**

<b><u>Officer</u></b>	<b><u>Title</u></b>	<b><u>Home Address</u></b>	<b><u>Business Address</u></b>
Stewart G. MacDonald, Jr.	President/ Secretary	24 Wheeler Road Lincoln Ma 01773	22 Water Street Cambridge MA 02141
Neil F. MacLellan	Vice President/ Treasurer	84 Audobon Road Walpole MA 02081	22 Water Street Cambridge MA 02141
Sandra E. MacDonald	Asst. Secretary	2 Bailey Hill Road Natick MA 01760	None

**Mac-Gray Co., Inc.**  
**Board of Directors**  
**Tax ID # 04-2151044**

<b><u>Director</u></b>	<b><u>Address</u></b>
Patrick Flanagan	164 Highland Street Milton MA 02186
Daniel W. MacDonald	1727 Nichols Canyon Road Los Angeles CA 90046
Evelyn C. MacDonald	27 Holtt Road Belmont MA 02178
Sandra E. MacDonald	2 Bailey Hill Road Natick MA 01760
Stewart G. MacDonald, Jr.	24 Wheeler Road Lincoln MA 01773
Albert A. Napolitano	111 Columbia Road Arlington MA 02174
John S. Olbrych	Fire Ridge Farm 105 High Road Newbury MA 01951
Donald M. Shaw	P.O. Box 8312 Fernandina Beach FL 32035