

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

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED

99 JAN 29 PM 1:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # F94000002914

1. Corporation Name
ADVENT REALTY, INC. OF SOUTH FLORIDA

Principal Place of Business 28 STATE STREET 10TH FLOOR BOSTON MA 02109	Mailing Address 28 STATE STREET 10TH FLOOR BOSTON MA 02109
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/03/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 04-3092338	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		11 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SEGEL, ARTHUR I			12 NAME			
STREET ADDRESS	28 STATE STREET			13 STREET ADDRESS	28 State Street, 10th Floor		
CITY-ST-ZIP	BOSTON MA 02109			14 CITY-ST-ZIP			
TITLE	C	<input type="checkbox"/> DELETE		21 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RUANE, MICHAEL A			22 NAME			
STREET ADDRESS	28 STATE STREET, 10TH FLOOR			23 STREET ADDRESS			
CITY-ST-ZIP	BOSTON MA 02109			24 CITY-ST-ZIP			
TITLE	VTS	<input type="checkbox"/> DELETE		31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NEHER, ANDREW M			32 NAME			
STREET ADDRESS	28 STATE STREET, 10TH FLOOR			33 STREET ADDRESS			
CITY-ST-ZIP	BOSTON MA 02109			34 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WEISS, ERICA H			42 NAME			
STREET ADDRESS	1200 19TH ST. N.W., STE. 400			43 STREET ADDRESS			
CITY-ST-ZIP	WASHINGTON DC 20036			44 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROSENTHAL, BARRY P			52 NAME			
STREET ADDRESS	1200 19TH ST. N.W., STE. 400			53 STREET ADDRESS			
CITY-ST-ZIP	WASHINGTON DC 20036			54 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SAKOWICH, KAREN L			62 NAME			
STREET ADDRESS	28 STATE STREET, 10TH FLOOR			63 STREET ADDRESS			
CITY-ST-ZIP	BOSTON MA 02109			64 CITY-ST-ZIP			

(Handwritten signature)

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14. I 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, with all other like empowered.

SIGNATURE: *(Handwritten signature)*, Erica H. Weiss 01/28/99 (202) 778-6150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

CR2E034 (11/98)

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ACCOUNT NO. : 072100000032
 REFERENCE : 116606 4355031
 AUTHORIZATION : *Patricia Pruitt*
 COST LIMIT : \$ 150.00

ORDER DATE : January 28, 1999
 ORDER TIME : 12:26 PM
 ORDER NO. : 116606-005
 CUSTOMER NO: 4355031
 CUSTOMER: Debra J. Pruitt, Legal Asst
 Bingham Dana Llp
 1200 19th Street, N.w.
 Suite# 400
 Washington, DC 20036

ANNUAL REPORT FILING

NAME: ADVENT REALTY, INC.

ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie L. Glisar

EXAMINER'S INITIALS: _____

RECEIVED
 99 JAN 29 PM 1:35
 DIVISION OF CORPORATION