

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

FILED

Apr 04 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003085 (6)
1. Corporation Name
ADVENT REAL ESTATE INVESTMENT TEXAS CORPORATION



Principal Place of Business: C/O TA ASSOCIATES, 45 MILK STREET, BOSTON MA 02109
Mailing Address: C/O TA ASSOCIATES, 45 MILK STREET, BOSTON MA 02109-5105

3. Date Incorporated or Qualified: 06/26/1995
3a. Date of Last Report: 04/22/1996
4. FEI Number: 04-3257254
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields with sub-fields for Suite, City, State, Zip, and Country.

9. Name and Address of Current Registered Agent: C T CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD, PLANTATION FL 33324

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code (FL).

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: _____ DATE: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUANE, MICHAEL A	1.2 NAME	
STREET ADDRESS	C/O TA ASSOCIATES REALTY, 45 MILK STREET	1.3 STREET ADDRESS	
CITY- ST- ZIP	BOSTON MA 02109	1.4 CITY- ST- ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEGEL, ARTHUR	2.2 NAME	
STREET ADDRESS	C/O TA ASSOCIATES REALTY, 45 MILK STREET	2.3 STREET ADDRESS	
CITY- ST- ZIP	BOSTON MA 02109	2.4 CITY- ST- ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POSTERNAK, NOEL	3.2 NAME	
STREET ADDRESS	C/O POSTERNAK ET AL, 100 CHARLES RIVER PLZ	3.3 STREET ADDRESS	
CITY- ST- ZIP	BOSTON MA 02109	3.4 CITY- ST- ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEHER, ANDREW M	4.2 NAME	
STREET ADDRESS	C/O TA ASSOCIATES REALTY, 45 MILK STREET	4.3 STREET ADDRESS	
CITY- ST- ZIP	BOSTON MA 02109	4.4 CITY- ST- ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEGAETA, ROBERT A	5.2 NAME	Treasurer
STREET ADDRESS	C/O TA ASSOCIATES REALTY, 45 MILK STREET	5.3 STREET ADDRESS	Andrew M. Neher
CITY- ST- ZIP	BOSTON MA 02109	5.4 CITY- ST- ZIP	45 Milk Street
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	Boston, MA 02109
NAME		6.2 NAME	
STREET ADDRESS		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 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: Andrew M. Neher Date: 3/25/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)

617-338-4300