

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company  
**DOCUMENT # M98000000537**  
  
CONCORD RETAIL ASSOCIATES, L.L.C.  
28 STATE STREET  
BOSTON MA 02109

1a. Principal Place of Business Address  
28 STATE STREET  
BOSTON MA 02109

2. Principal Place of Business c/o TA Associates Realty Suite, Apt. #, etc. 28 State Street, 10th Flr. City & State Boston, Massachusetts Zip 02109	2a. Mailing Address c/o TA Associates Realty Suite, Apt. #, etc. 28 State Street, 10th Flr. City & State Boston, Massachusetts Zip 02109	Country USA	Country USA
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3. Date Organized or Qualified 05/28/1998	3a. State of Formation DE
4. FEI Number 06-1517733	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent  
CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

8. Name and Address of New Registered Agent/Office  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, etc.  
City  
FL  
Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when retaking) DATE \_\_\_\_\_

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	SEGEL, ARTHUR I	c/o TA Associates Realty 28 State Street, 10th Floor	Boston, MA 02109
MGR	RUANE, MICHAEL A	c/o TA Associates Realty 28 State Street, 10th Floor	Boston, MA 02109

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11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: SEE ATTACHMENT March 15, 1999 --202/778-6150  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #