FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



BERKSHIRE REALTY ENTERPRISES LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **B9300000480**

DIVISION OF CORPORATIONS

97 DEC -9 PM 1:28



					(X)12/10		
Malling Address		Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
470 ATLANTIC AVE., STE. 1300		470 ATLANTIC AVE., STE. 1300 BOSTON MA 02210			11/09/1993	\$0.00	
BOSTON MA 02210					3a. Date of Last Report		
					04/14/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address		2a. Principal Office Address			State or Country of Formation MA	to date:	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			6. FEI Number	f")	
City & State		City & State			04-2717076	Applied For Not Applicable	
Only & Oldio					7. Certificate of Status Desired	S8.75 Additional	
Zip	Country	7ip Country			8. Make check payable to: Dept. of State (See reverse side for fee information)		
			····	-			
9, 1	lame and Address of Current Re	Istered Agent Namo			10. If changed, new Registered Agent/Office		
THE PRENTICE-HALL CORPORATION SYSTEM, INC.							
1201 HAYS ST		Street Addi		dress (P.O. Box Number Is Not Acceptable)			
STE 105		Suite, Apt. #, etc.					
TALLAHASSEE FL 3	2301	City			FL Zip Code		
10a. Pursuent to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)							
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY							
		BE REGISTERED ANI Address of Each General	De de sa		H THIS OFFICE.	Registration/	
11. Name(s) of Gener	al Partner(s)	11a. (Do NOT Use Post Office Bo:	x Numbers)	11b.	City, State & Zip Code	11c. Hegistration/ Document Number	
THE BERKSHIRE COMPANIES LTD.		470 ATLANTIC AVE., ST		BOSTON MA 02210		B93000000479	
				400002370564 -12/12/9701045024 ****156.25 ****156.2		705645 /9701045024 56.25 ****156.25	
<i>A</i>							
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I rolease the Division of Corporations from any liability of non-compliance with Section 19.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 640. Further same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 640. Further same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 640. Further same legal effects as if made under certify that I am a General Partner of the limited partnership.

SIGNATURE

Typed or Printed Name of Goneral Partner Signing Form

CLAIRE FUMALIZIO ASSISTANT TREASURER DATE 11/24/9

Daytime Telephono Number 617 · 423 · 2

(18/0) 000000