2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

FILED
Aug 14, 2006 08:00 AM
Secretary of State

DOCUMENT # A33005

1. Entity Name
FLORIDA TOWN PLACE LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
C/O AEW CAPITAL MANAGEMENT, L.P. WORLD TRADE CENTER EAST, TWO SEAPORT LANE BOSTON, MA 02110	C/O AEW CAPITAL MANAGEMENT, L.P. WORLD TRADE CENTER EAST, TWO SEAPORT LANE BOSTON, MA 02110

DO NOT WRITE IN THIS SPACE

07072006 No Chg-LP CR2E003 (11/05)

4. FEI Number
04-3188849
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS $900.00
On or after September 6, 2006, Fee will be $1000.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	P38743
NAME	EASTRICH NO. 90 CORP.
STREET ADDRESS	WORLD TRADE CENTER EAST, TWO SEAPORT LANE
CITY-ST-ZIP	BOSTON, MA 02110
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08/14/06-80002-003 900.00

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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Susan E Bonebone V.P. Authorized rep. 7/31/06 617-261-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #