

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 NOV 18 AM 11:34



1. Name of Limited Partnership

1a. DOCUMENT #
B94000000068

J.D. EASTRICH PROPERTIES NO. 1 LIMITED PARTNERSHIP

Mailing Address

~~C/O ALORICH EASTMAN & WALTON~~
225 FRANKLIN STREET
BOSTON MA 02110

Principal Office Address

C/O THE PRENTICE HALL CORPORATION SYSTEM
32 LOOCKERMAN SQUARE, SUITE L-100
DOVER DE 19901

3. Date Formed or Registered

02/25/1994

5a. Capital Contributions as Shown on record.

\$3,104,506.55

3a. Date of Last Report

12/27/1996

5b. Amount of Capital Contributions in FLORIDA to date:

4. State or Country of Formation

DE

6. FEI Number

04-3222734

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

c/o AEW Capital Management

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

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

10. If changed, new Registered Agent/Office

Name

000002354370-5

-11/21/97--01087--023

Street Address (P.O. Box Number Is Not Accepted) ***541.25 ***541.25

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant 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)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

J.D. EASTRICH PROPERTIES COR

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

C/O 225 FRANKLIN STRE

11b. City, State & Zip Code

BOSTON MA 02110

11c. Registration/Document Number

F83000005284

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 release the Division of Corporations from any liability of non-compliance with Section 119.07(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 oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

10/24/97

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (5/97)