2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005							FILEU				
	DOCUMENT # B9800000333  1. Entity Name CONCORD-FUND IV RETAIL, L.P.						2005 APR 19 PM 3: 25 DIVIDION OF CORPORATIONS				
	Principal Place of Business C/O TA ASSOCIATES REALTY 28 STATE ST., 10TH FLOOR BOSTON, MA 02109			Mailing Address C/O TA ASSOCIATES RE 28 STATE ST., 10TH F BOSTON, MA 02109	****		`¡ALLAHASSEE, FLORIDA				
Ì	2. Principal Pla	ce of Busir	ness	3. Mailing Address							
-	Suite, Apt. #	, etc.		Suite, Apt. #, etc.		02092005	Chg-LP	CR2E00	3 (10/03)		
	City & State			City & State	City & State			736		Applied For Not Applicable	
-	Zip	Country		Zip Coun		ntry	5. Certificate of Status Desired   \$8.75 Additional Fee Required			8.75 Additional	
ŀ		6. Name	and Address of Current	Registered Agent			7. Name and A	ddress of New R	egistered Ag	ent	
- [	<del>, , , , , , , , , , , , , , , , , , , </del>					Name					
	1201 HAYS	STREE	RVICE COMPANY F 32301-2525			Street Address (	Street Address (P.O. Box Number is Not Acceptable)				
						City	ity			Zip Code	
						City			FL	Zip Code	
ļ	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 acce the obligations of registered agent.									miliar with, and accept	
	SIGNATURE Signature, typed or printed name of registered agent and title if applicable.								DATE		
		Capital Contributions as Shown on record. \$9,453,996.00 10. Amount of Capital Co in FLORIDA to date.					96				
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH TH											
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general  12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES											
	DOCUMENT /	UMENT / M9800000537				EET ADDRESS		ADDRESS CHA	ANGES ONL		
	STREET ADDRESS	28 STATE	STREET , MA 02109			Y~ST-ZIP					
	DOCUMENT # NAME				STR	LEET ADDRESS					
	STREET ADDRESS CITY-ST-ZIP				ÇIT	Y-ST-ZIP					
STAPLE CHECK HERE	DOCUMENT # NAME				STR	EET ADDRESS					
	STREET ADDRESS CITY-ST-ZIP				Cit	Y-ST-ZIP					
	NAME				STE	IEET ADDRESS		00051	2498	370	
	STREET ADDRESS CITY-ST-ZIP				CIT	Y-SI-ZiP					
	DOCUMENT # NAME				STF	REET ADDRESS					
	STREET ADDRESS CITY-ST-ZIP				CAT	Y-ST-ZIP					
	DOCUMENT # NAME STREET ADDRESS				STF	REET ADDRESS					
	CITY-ST-ZIP					Y-ST-ZIP	nation 110 03/02/2	Davido Statuto	I further as "	(u.that the information	
ļ	14. I 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 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										
	SIGNATI	URE:	SIGNATURE AND TYPED O	OR PRINTED NAME OF SIGNING GENE	RAL PARTI	NER	3/	/3//os*		476-2700 vitime Phone #	



FILEU

2005 APR 19 PM 3: 25

ACCOUNT NO. : 07210000032

DIVISION OF CORPORATIONS

REFERENCE :

318710

4304937 LAHASSEE, FLORIDA

AUTHORIZATION :

COST LIMIT : \$ 526.25

ORDER DATE: April 15, 2005

ORDER TIME : 10:02 AM

ORDER NO. : 318710-010

CUSTOMER NO: 4304937

CUSTOMER: Anne T. Leland, Legal Asst

Mintz, Levin, Cohn, Ferris,

One Financial Center

Boston, MA 02111

## ANNUAL REPORT FILING

NAME: CONCORD-FUND IV RETAIL, L.P.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - Ext.

EXAMINER'S INITIALS: