


**2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By September 14, 2007**

**FILED**  
07 JUN -5 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # B98000000333</b>	
1. Entity Name CONCORD-FUND IV RETAIL, L.P.	

Principal Place of Business C/O TA ASSOCIATES REALTY 28 STATE ST., 10TH FLOOR BOSTON, MA 02109	Mailing Address C/O TA ASSOCIATES REALTY 28 STATE ST., 10TH FLOOR BOSTON, MA 02109
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05242007 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 06-1517736	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE IN THIS SPACE**

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 14, 2007, 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 #	M98000000537
NAME	CONCORD RETAIL ASSOCIATES, L.L.C.
STREET ADDRESS	28 STATE STREET
CITY-ST-ZIP	BOSTON, MA 02109
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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100103919501

STAPLE CHECK HERE

**DO NOT WRITE IN THIS SPACE**

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:** Michael Ruane Michael Ruane 5/24/07 617 476 2700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #



CORPORATION SERVICE COMPANY

B98000000333

ACCOUNT NO. : 072100000032

REFERENCE : 931208 4304937

AUTHORIZATION : *Sue Coleman*

COST LIMIT : \$ 900.00

ORDER DATE : June 4, 2007

ORDER TIME : 4:29 PM

ORDER NO. : 931208-010

CUSTOMER NO: 4304937

BK.

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07 JUN -5 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

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

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 2914

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
07 JUN -5 PM 12:46  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA