FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE

Typed or Printed Name of General Partner Signing Form

DOCUMENT# B98000000479

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 NOV -3 PM 2: 05

WINDSOR AT PARK TERRACE LIMITED PARTNERSHIP					
Mailing Address C/O GENERAL INVESTMENT & DEVELOPMENT CO. 600 ATLANTIC AVENUE. SUITE 2000 BOSTON MA 02210	Principal Office Address 1013 CENTRE ROAD WILMINGTON DE 19905		3. Date Formed or Registered 07/24/1998 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$2,000.00 5b. Amount of Capital Contributions in FLORIDA tentes to the state of the stat	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation DE	Contributions in PLORIDA to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired		
Zip Country	Zip Country			\$8.75 Additional Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent Name		Momo	10. If changed, new Registered Agent/Office		
CORPORATION SERVICE COMPANY 1201 HAYS STREET		Street Address (P.O. Box Number Is Not Acceptable)			
TALLAHASSEE FL 32301-2525 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 Pariner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11b.			11c. Registration/	
WINDSOR AT PARK TERRACE INVE	600 ATLANTIC AVENUE,		BOSTON MA 02210	F98000004244	
			-11/05	6813463 /9801068020 41.25 ****141.25	
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					