


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000002463 1. Corporation Name CORNERSTONE REAL ESTATE ADVISERS, Inc.			
Principal Place of Business		Mailing Address	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 One Financial Plaza Suite # 1700 City & State Hartford, CT Zip 06103 Country U.S.A.		2a. Mailing Address 26 c/o B040 Suite # 1295 State Street City & State Springfield, MA Zip 01111 Country U.S.A.	
3. Date Incorporated or Qualified 05/12/1994		4. FEI Number 04-3223145	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent Stroud, Joseph O. Jr. 1301 Gulf Life Drive, Suite 1500 Jacksonville, FL 32207		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE: _____ (NOTE: Registered Agent's signature required when reinstating) DATE: _____			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input type="checkbox"/> DELETE		11 TITLE (See attached schedule of Directors and Officers) <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	
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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.			
SIGNATURE: <i>Ann F. Lomeb</i>		April 28, 1998 413/744-2993	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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CORNERSTONE REAL ESTATE ADVISERS, INC.

Directors:

Gary E. Wendlandt, Chairman
Susan A. Alfano
Lawrence V. Burkett, Jr.
✓ Alan M. Connor
✓ John B. Davies
✓ Kenneth L. Hargreaves
✓ Isadore Jermyn
Margaret Sperry

Officers:

✓ Alan M. Connor	President and Chief Executive Officer
✓ David J. Reilly	Executive Vice President
Edward M. Kline	Treasurer
Ann F. Lomeli	Clerk (Secretary)

The mailing address for all of the above except Messrs. Connor and Reilly is as follows:

1295 State Street
Springfield, MA 01111

The mailing address for Messrs. Connor and Reilly is as follows:

1 Financial Plaza
Suite 1700
Hartford, CT 06103-2603

Current since March 11, 1998