

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002463

FILED
Apr 30, 2004
Secretary of State

Entity Name: CORNERSTONE REAL ESTATE ADVISERS, INC.

Current Principal Place of Business:

ONE FINANCIAL PLAZA
SUITE 1700
HARTFORD, CT 06103 US

New Principal Place of Business:

Current Mailing Address:

ONE FINANCIAL PLAZA
SUITE 1700
HARTFORD, CT 06103 US

New Mailing Address:

FEI Number: 04-3223145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CONNOR ALAN M.,
Address: 1 FINANCIAL PLAZA STE 1700
City-St-Zip: HARTFORD, CT

Title: CS () Delete
Name: LOMELI, ANN F
Address: 1295 STATE STREET
City-St-Zip: SPRINGFIELD, MA 01111

Title: D () Delete
Name: JERMYN, ISADORE
Address: 1295 STATE ST.
City-St-Zip: SPRINGFIELD, MA 01111

Title: D () Delete
Name: HARGREAVES, KENNETH L
Address: 1295 STATE ST.
City-St-Zip: SPRINGFIELD, MA 01111

Title: D () Delete
Name: GUNTON, HOWARD E
Address: 151 STEEPVIEW DRIVE
City-St-Zip: HAMPDEN, MA 01036

Title: D () Delete
Name: REESE, STUART H
Address: 45 DRUMLIN ROAD
City-St-Zip: WEST SIMSBURY, CT 06092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REILLY, DAVID J
Address: 1 FINANCIAL PLAZA STE 1700
City-St-Zip: HARTFORD, CT 06103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WALCOTT, EUSTIS
Address: ONE FINANCIAL PLAZA, SUITE 1700
City-St-Zip: HARTFORD, CT 06103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW C. WILLIAMS

AS

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date

ANDREW C. WILLIAMS, ASSISTANT SECRETARY
ONE FINANCIAL PLAZA
SUITE 1700
HARTFORD, CT 06103