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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

600 ATLANTIC AVE.

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

127 672.91.80

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400006436 (9)

WINDSOR AT ASHTON PARK INVESTORS CORPORATION

appears in Block 12 or Block 13 if changed, or on an attachment with an address

800 ATLANTIC AVE. SUITE 2000 BOSTON MA 02210 SUITE 2000 BOSTON MA 02210-2268 3a. Date of Last Report 05/01/1996 3. Date Incorporated or Qualified 12/16/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 04-3257595 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Ζıp Country Country This corporation has liability for intangible tax under s. 199.032, 29 30 Yes X No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 81 1201 HAYS ST. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.05.02 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: Signature, typed or printed name of registered agent and fit e if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. 🔲 DELETË X Change TITLE 1.1 TITLE Addition DEWITT, RICHARD E. DEWITT, ROBERT E. NAME 1.2 NAME 600 ATLANTIC AVE. STREET ADDRESS 1.8 STREET ADDRESS **BOSTON MA** BOSTON. DITY-ST-ZIP MA 1.4 CITY - \$1 - ZIP 02210 DELETE ☐ Change X Addition TITLE 2.1 1111.6 P/D COSTANTINI, VINCENT J NAME 2.2 NAME WILLFAM F. MURDY 600 ATLANTIC AVE. STREET ADDRESS 2.8 STREET ADDRESS 600 ATLANTEC AVE. **BOSTON MA 02210** CITY-ST-ZIP 02210 2 4 CHY+S1+2(P BOSTON, MA TITLE DELETE ☐ Change ☐ Addition 3111111 Johnson, Stuart R NAME 3.2 NAME **600 ATLANTIC AVE.** STREET ADDRESS 3 STREET ADDRESS **BOSTON MA 02210** CITY-ST-ZIP 3 4. CITY-ST-7IP DELETE TITLE [] Change 4.1 TITLE ☐ Addition WYRWICZ, STANLEY B NAME 4 2 NAME 600 ATLANTIC AVE. STREET ADDRESS 43 STREET ADDRESS **BOSTON MA 02210** CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELETE TITLE Change Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE ■ Addition 6.1 TITLE NAME G.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6:4 CITY-ST-ZIP 14. I do 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

Jamber B Hlunging