## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # F9500001282 (1)

1. Corporation Name

BRI PARK COLONY-WOODLAND-IL INC.

BRI P	ark colony-woodland	-II, ∦N	<b>G.</b>									
Principal Place of	of Business	Ma	iling Address						ON OUR ORIE	44161 118	.III	H
	erkshire group - attn: legal de fic avenue a 02210		C/O THE BERKSHIR 470 ATLANTIC AVEN BOSTON MA 02210		P - A1	TTN: LEG	GAL DEP	ग				
			DOUBLE AND GEET				•	3. Date Incorporated or Qualified 03/17/1995	3a. Date	of Last	Report	_
2. Principal Place of Business			2a. Mailing Address 26					I ADDITED FOR I			Applied For	
								1101142				}
Suite, Apt. #, etc.			Suile, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & State			City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country			Zip Country					R. This corporation has liability for intangible tax under s 199,032,				
24	25	29	*	30	zen iei y				intangibie ta ☐ No	k urider	5 199,002,	
	9. Name and Address of Current	L	ered Agent	.4.2.5.1	1	·	L	10. Name and Address of New F	egistered /	agent		
					81	Name	)					
THE PR	M, INC.		82	Street	LAddres:	dress (P.O. Box Number is Not Acceptable)				႕		
1201 HAYS STREET, SUITE 105						0,,000	7 (00) (0)					
TALLA	HASSEE FL 32301				83							
					84	City			FL	85	Zip Code	
or registere	the provisions of Sections 607.0502 and agent, or both, in the State of Florida, and accept the obligations of, Section	a. Such	change was authorize	ad by the	ove-r	narned cooration's	corporations board of	on submits this statement for the pur of directors. I hereby accept the app	pose of cha ointment as	nging it register	ts registered officered agent. I am	æ
SIGNATURE												
s	ignature, typica or printed name of registered agent a					nt signature	required w	non reinstating)	3TAD			-
<u> 12.                                      </u>	OFFICERS AND	DIREC		13			······	ADDITIONS/CHANGES TO OFF				
TITLE	· •		DELETE	1. 1	TITLE			•		] Chang	ge 🔲 Addition	
NAMÉ	GERBER, LAURENCE 470 ATLANTIC AVENUE			12	NAME							
STREET ADDRESS	BOSTON MA 02210			1.3	STREET	ADDRESS						
CITY-ST-ZIP	VI DOSTON MA 02210		E SE EU		CITY-S	31 - ZIP				- A		
TITLE	MARSHALL, DAVID F		DELETE	II.	TITLE				L	] Chang	ge 🔲 Addition	
NAME Asset London	470 ATLANTIC AVENUE			l	NAME							
STREET ADDRESS	BOSTON MA 02210					ADDRESS						
CITY-ST-ZIP TITLE	S		DELETE		TITLE	iT-ZIP •	<del> </del>			7 Chang	ge 🔲 Addition	
NAME	MOSKOWITZ, DAVID		breeze	ı	NAME				L	_ Critarily	Je [] Addition	i
STREET ADDRESS	470 ATLANTIC AVENUE					1 ADDRESS						
CITY-ST-ZIP	BOSTON MA 02210				CITY-S		'					
TITLE	COB		DELETE		TITLE	) - ¿.jr	<del></del>	3000018	4017	I G5240	oe	
NAME	KRUPP, GEORGE				NAME			30000184 -05/28/96010	01907	27	,	
STREET ADDRESS	470 ATLANTIC AVENUE					ADDRESS		***200 <b>.</b> 00			•	
CITY-ST-ZIP	BOSTON MA 02210				CITY-S							
TITLE	AS		DELETE		TITLE		1	AT THE ART AND THE SECOND COMMENTS OF THE ART AND A SECOND COMMENT	Ü	Chang	ge 🔲 Addition	
NAME	SPELFOGEL, SCOTT D			5.2	NAME							
STREET ADDRESS	470 ATLANTIC AVENUE			5.3	STREET	ADDRESS	.[					
CITY-ST-ZIP	BOSTON MA 02210			5 4	CITY - S	S1 - ZIP						
TITLE	AT		DELETE	6 1	THILE		Vic	ce President/Tre	as. X	Chang	ge S Addition	
NAME	PRITCHARD, MARIANNE			6.2	NAME			,		$\sim$	~	
STREET ADDRESS	470 ATLANTIC AVENUE			63	STREET	ADDRESS	- [			્દ્ર	<i>[2]</i>	
CITY-ST-ZIP	BOSTON MA 02210			6.4	CITY - S	ST - 74P	1	_		*	, O	

14. 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 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 interchiment with an address.

SIGNATURE:

Marianne Pritchard

APR 3 0 1996

Baytine Phone #