

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

FILED
Mar 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000001284 (7)**

1. Corporation Name

BRI ALTAMONTE-II, INC.

Principal Place of Business

~~% THE BERKSHIRE GROUP~~
470 ATLANTIC AVE. ATTN: LEGAL DEPT.
BOSTON MA 02210

Mailing Address

~~% THE BERKSHIRE GROUP~~
470 ATLANTIC AVE. ATTN: LEGAL DEPT.
BOSTON MA 02210



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1995

4. FEI Number

59-3307857

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 **10 Berkshire Realty Co., Inc.**
Suite, Apt. #, etc.
22 **470 Atlantic Ave., ATTN: G. Martin**
City & State
23 **Boston, MA**
Zip
24 **02210**

25. Mailing Address

26 **10 Berkshire Realty Co., Inc.**
Suite, Apt. #, etc.
27 **470 Atlantic Ave., ATTN: G. Martin**
City & State
28 **Boston, MA**
Zip
29 **02210**

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST., STE. 105
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **GERBER, LAURENCE**
STREET ADDRESS **% THE BERKSHIRE GROUP, 470 ATLANTIC AVE.**
CITY-ST-ZIP **BOSTON MA**

TITLE **P** ☐ DELETE
NAME **MARSHALL, DAVID F**
STREET ADDRESS **% THE BERKSHIRE GROUP, 470 ATLANTIC AVE.**
CITY-ST-ZIP **BOSTON MA**

TITLE **S** ☐ DELETE
NAME **SPELFOGER, SCOTT D**
STREET ADDRESS **C/O THE BERKSHIRE GROUP, 470 ATLANTIC AVE.**
CITY-ST-ZIP **BOSTON MA**

TITLE **D** ☐ DELETE
NAME **ROSKIND, E. ROBERT**
STREET ADDRESS **THE LCP GROUP, 355 LEXINGTON AVE.**
CITY-ST-ZIP **NEW YORK NY 10017**

TITLE **VPT** ☐ DELETE
NAME **PRITCHARD, MARIANNE**
STREET ADDRESS **C/O THE BERKSHIRE GROUP, 470 ATLANTIC AVE**
CITY-ST-ZIP **NEEDHAM MA**

TITLE **AT** ☒ DELETE
NAME **LAURO, FRED**
STREET ADDRESS **C/O THE BERKSHIRE GROUP, 470 ATLANTIC AVE.**
CITY-ST-ZIP **BOSTON MA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CD** ☒ Change ☐ Addition
1.2 NAME **KRUPP, DOUGLAS**
1.3 STREET ADDRESS **470 ATLANTIC AVE,**
1.4 CITY-ST-ZIP **BOSTON, MA 02210**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **BERKSHIRE REALTY Co., INC, 470 ATLANTIC AVE**
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **THE BERKSHIRE GROUP, 470 ATLANTIC AVE**
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **BERKSHIRE REALTY Co., INC, 470 ATLANTIC AVE**
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME **AT RICHARD, KENNETH J**
6.3 STREET ADDRESS **470 ATLANTIC AVE, BERKSHIRE REALTY Co.**
6.4 CITY-ST-ZIP **BOSTON, MA 02210**

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 address.

SIGNATURE

2/27/98 (617) 423-4235

CP2E034 (10/97)