

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

0000645

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F95000001285			
1. Corporation Name BRI PLANTATION COLONY-II, INC.			
Principal Place of Business BERKSHIRE REALTY CO INC 470 ATLANTIC AVE. ATTN: G MARTIN BOSTON MA 02210 US		Mailing Address BERKSHIRE REALTY CO INC 470 ATLANTIC AVE. ATTN: G MARTIN BOSTON MA 02210 US	
2. Principal Place of Business 21 1 Beacon Street-Suite 1550 Suite, Apt. #, etc. 22 Attn: K. Richard City & State 23 Boston, MA Zip 24 02108 Country 25		2a. Mailing Address 26 1 Beacon Street-Suite 1550 Suite, Apt. #, etc. 27 Attn: K. Richard City & State 28 Boston, MA Zip 29 02108 Country 30	
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST., STE. 105 TALLAHASSEE FL 32301			
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 too if applicable (NOTE: Registered Agent signature required when re-stating)			
12. OFFICERS AND DIRECTORS			
TITLE	CD	[] DELETE	
NAME	KRUPP, DOUGLAS		
STREET ADDRESS	470 ATLANTIC AVE		
CITY-STATE-ZIP	BOSTON MA 02210		
TITLE	P	[] DELETE	
NAME	MARSHALL, DAVID F		
STREET ADDRESS	BERKSHIRE REALTY CO INC, 470 ATLANTIC AVE		
CITY-STATE-ZIP	BOSTON MA		
TITLE	AT	[] DELETE	
NAME	RICHARD, KENNETH J		
STREET ADDRESS	470 ATLANTIC AVE		
CITY-STATE-ZIP	BOSTON MA 02210		
TITLE	S	[] DELETE	
NAME	SPELFOGEL, SCOTT D		
STREET ADDRESS	% THE BERKSHIRE GROUP, 470 ATLANTIC AVE.		
CITY-STATE-ZIP	BOSTON MA		
TITLE	VPT	[] DELETE	
NAME	PRITCHARD, MARIANNE		
STREET ADDRESS	BERKSHIRE REALTY COMPANY INC, 470 ATLANTIC		
CITY-STATE-ZIP	BOSTON MA 02210		
TITLE		[] DELETE	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
11 TITLE		[X] Change [] Addition	
12 NAME			
13 STREET ADDRESS	1 Beacon Street-Suite 1500		
14 CITY-STATE-ZIP	Boston, MA 02108		
21 TITLE		[X] Change [] Addition	
22 NAME			
23 STREET ADDRESS	1 Beacon Street-Suite 1550		
24 CITY-STATE-ZIP	Boston, MA 02108		
31 TITLE		[X] Change [] Addition	
32 NAME			
33 STREET ADDRESS	1 Beacon Street-Suite 1550		
34 CITY-STATE-ZIP	Boston, MA 02108		
41 TITLE		[X] Change [] Addition	
42 NAME			
43 STREET ADDRESS	1 Beacon Street-Suite 1500		
44 CITY-STATE-ZIP	Boston, MA 02108		
51 TITLE		[X] Change [] Addition	
52 NAME			
53 STREET ADDRESS	1 Beacon Street-Suite 1550		
54 CITY-STATE-ZIP	Boston, MA 02108		
61 TITLE		[] Change [] Addition	
62 NAME			
63 STREET ADDRESS			
64 CITY-STATE-ZIP			

FILED
99 MAR 15 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/17/1995

4. FEI Number
65-0572030

5. Certificate of Status Desired [] \$8.75 Additional Fee Required

6. Election Campaign Financing [] \$5.00 May Be Added to Fees

7. This corporation owes the current year Intangible Personal Property Tax [] Yes [] No

10. Name and Address of New Registered Agent

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, with all other like empowered

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)