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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600006168 (6)

CAPREIT OF WESTWOOD PINES, INC. Principal Place of Business Mailing Address 11200 ROCKVILLE PIKE 11200 ROCKVILLE PIKE ROCKVILLE MD 20852-3103									
					Ì	3. Date Incorporated or Qualified 11/25/1996		ite of Last I	Report
	Place of Business	2a. Mailing Address				4, FEI Number			pplied For
21		26				-NOT APPLICABLE 52	20026		lot Applicable
Suite, Ap	ot #, etc	Suite, Apt. #, etc	D.		l	5. Certificate of Status Desired	0		Additional Regulred
22 City & S	tate	City & State				6. Election Campaign Financing	····		May Be
23		28				Trust Fund Contribution			to Fees
Ζφ	Country	Zip	ļ	intry		8. This corporation has fiability for			s. 199.032,
24	[25]	29	30					No	
	g, Name and Address of Curre			81 Name		10. Name and Address of New Re	Gistereo	Agent	
	PRPORATION SERVICE COMPAN' DI HAYS STREET	ī		L		/D.O. Day Number is Alat Assessed	h la\		
_	LLAHASSEE FL 32301-2525			pz Street	Aggres	s (P.O. Box Number is Not Acceptal	DIO)		
174				83					,
				84 City				85 Zip	Code
		00 - 1 007 (500 FIELD					FL		lto registered
agent SIGNATUR	nt to the provisions of Sections 607.05 or registered agent, or both, in the Stat Familiar with, and accept the obli f	igations of, Section 607.050	05, Florida Sta	tutes.					
	Signature, type dior printed name of registered a		(NOTE: Registere	d Agent signatur	e required		DATE		
12,	Signer we type dior pented name of registered a OFFICERS A	NO DIRECTORS	13,		re required	when reinstating) ADDITIONS/CHANGES TO OFFI			
12. THEF	Signature: type dior printed name of ingistered a OFFICERS A		13. E 1,1 T	TLE	V	ADDITIONS/CHANGES TO OFFI		DIRECTO Change	
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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 by 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 attay in the address.

SIGNATURE:

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301-231-8700

FILED

May 08 1997 8:00am

Secretary of State

me Phone # 0010901