## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000004244

Entity Name: WINDSOR AT PARK TERRACE INVESTORS CORPORATION

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
STE 2000, 600 ATLANTIC AVE. BOSTON, MA 02210				600 ATLANTIC AVE. SUITE 2000 BOSTON, MA 02210		
Current Mailing Address:				New Mailing Address:		
STE 2000, 600 ATLANTIC AVE. BOSTON, MA 02210			600 ATLANTIC AVE. SUITE 2000 BOSTON, MA 02210			
FEI Number:	65-0851503	FEI Number Applied For ( )	FEI Num	ber Not Appli	icable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US						
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.						
SIGNATUR	RE:					
Electronic Signature of Registered Agent Date						
Election Can	npaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () DEWITT, ROBE STE 2000, 600 BOSTON, MA			Title: Name: Address: City-St-Zip:	DEWITT, ROBE	Change()Addition ERT E AVE., SUITE 2000
Title: Name: Address: City-St-Zip:	MARTIN, PETER	AVENUE, SUITE 2000		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition
Title: Name: Address: City-St-Zip:	VPS () HINKLE, TIMOT STE 2000, 600 BOSTON, MA	ATLANTIC AVE.		Title: Name: Address: City-St-Zip:	HINKLE, TIMOT	AVE., SUITE 2000
Title: Name: Address: City-St-Zip:	D () ROBERTS, WIL STE 2000, 600 BOSTON, MA			Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	JACOBY, FRAN	AVENUE, SUITE 2000

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER S. MARTIN T 04/14/2005