

2002 UNIFORM BUSINESS REPORT (UBR)

0617637 AT

DOCUMENT # F98000005396

1. Entity Name
WINDSOR AT QUIET WATERS INVESTORS CORPORATION

Principal Place of Business Mailing Address
% GENERAL INVESTMENT & DEVELOPMENT CO. % GENERAL INVESTMENT & DEVELOPMENT CO.
600 ATLANTIC AVENUE, SUITE 2000 600 ATLANTIC AVENUE, SUITE 2000
BOSTON MA 02210 BOSTON MA 02210

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 65-0866239 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DEWITT, ROBERT E		NAME		
STREET ADDRESS	600 ATLANTIC AVENUE, SUITE 2000		STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02210		CITY-ST-ZIP		
TITLE	VDS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	JOHNSON, STUART R		NAME		
STREET ADDRESS	600 ATLANTIC AVENUE, SUITE 2000		STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02210		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FARRINGTON, ROBERT S JR		NAME		
STREET ADDRESS	600 ATLANTIC AVENUE, SUITE 2000		STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02210		CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WYRWICZ, STANLEY B		NAME		
STREET ADDRESS	600 ATLANTIC AVENUE, SUITE 2000		STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02210		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MARTIN, PETER S		NAME		
STREET ADDRESS	600 ATLANTIC AVENUE, SUITE 2000		STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02210		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WALLACE, W. G		NAME		
STREET ADDRESS	600 ATLANTIC AVENUE, SUITE 2000		STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02210		CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 4/17/02 Daytime Phone # 617-973-9680

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FILED

02 APR 23 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)

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ACCOUNT NO. : 072100000032

REFERENCE : 518563 4383898

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 150.00

ORDER DATE : April 9, 2002

ORDER TIME : 2:20 PM

ORDER NO. : 518563-180

CUSTOMER NO: 4383898

CUSTOMER: Ms. Kit Kelly
General Investment &
Suite 2000
600 Atlantic Avenue
Boston, MA 02210

ANNUAL REPORT FILING

NAME: WINDSOR AT QUIET WATERS
INVESTORS CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: *Deborah Schroder* - Ext. 1118

EXAMINER'S INITIALS: _____

RECEIVED
02 APR 22 PM 3:22
TALLAHASSEE, FLORIDA
DIVISION OF STATE
CORPORATIONS