


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

FILED

Jan 29 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 # **P04221** (8)
1. Corporation Name
TWO WINTHROP PROPERTIES, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/30/1984	4. FEI Number 04-2782020	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 c/o First Winthrop Corp. Suite, Apt. #, etc.	2a. Mailing Address 26 SAME AS PRINCIPAL Suite, Apt. #, etc.
22 Five Cambridge Center 9th Fl City & State	28 Cambridge, MA City & State
23 Cambridge, MA Zip	29 02142 Zip
25 US Country	30 US Country

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 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
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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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____
Signature: typed or printed name of registered agent and title if applicable.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **Peter Braverman** Sr. Vice President (516) 681-3636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)

TWO WINTHROP PROPERTIES, INC.

OFFICERS:

CHIEF EXECUTIVE OFFICER
CHIEF OPERATING OFFICER/PRESIDENT
SENIOR VICE PRESIDENT
CHIEF FINANCIAL OFFICER
VICE PRESIDENT/SECRETARY
VICE PRESIDENT
VICE PRESIDENT
TREASURER

MICHAEL ASHNER
RICHARD J. MCCREADY
PETER BRAVERMAN
ED WILLIAMS
CAROLYN TIFFANY
LARA SWEENEY
STEPHEN BONIFIELD
TOM STAPLES

**** All officers have an address c/o**

FIRST WINTHROP CORPORATION
5 CAMBRIDGE CENTER
9TH FLOOR
CAMBRIDGE, MA 02142

DIRECTORS:

MICHAEL ASHNER
c/o FIRST WINTHROP CORPORATION
5 CAMBRIDGE CENTER
9TH FLOOR
CAMBRIDGE, MA 02142

PETER BRAVERMAN
c/o FIRST WINTHROP CORPORATION
5 CAMBRIDGE CENTER
9TH FLOOR
CAMBRIDGE, MA 02142

RICHARD J. MCCREADY
c/o FIRST WINTHROP CORPORATION
5 CAMBRIDGE CENTER
9TH FLOOR
CAMBRIDGE, MA 02142