

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P38743

1. Entity Name
EASTRICH NO. 90 CORPORATION

Principal Place of Business

% ALDRICH, EASTMAN & WALTCH, L.P.,
225 FRANKLIN STREET
BOSTON MA 02110

Mailing Address

% ALDRICH, EASTMAN & WALTCH, L.P.,
225 FRANKLIN STREET
BOSTON MA 02110

2. Principal Place of Business

AEW CAPITAL MGMT, L.P.

Suite, Apt. #, etc.

TWO SEAPORT LANE

City & State

Boston, MA

Zip

02210-3021

Country

3. Mailing Address

AEW CAPITAL MGMT, LP

Suite, Apt. #, etc.

TWO SEAPORT LANE

City & State

Boston, MA

Zip

02210-3021

Country

4. FEI Number 04-3148139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE P
NAME GIFFORD, ROBERT G
STREET ADDRESS 41 OXFORD RD
CITY-ST-ZIP NEWTON CENTRE MA 02159 ☒ Delete

TITLE VD
NAME MONAHAN, J. GRANT
STREET ADDRESS 68 SNAKE HILL ROAD
CITY-ST-ZIP BELMONT MA 02178 ☐ Delete

TITLE T
NAME LAGERLUND, KARIN
STREET ADDRESS 225 FRANKLIN ST.
CITY-ST-ZIP BOSTON MA ☒ Delete

TITLE VD
NAME ALBERT, THOMAS K.
STREET ADDRESS 178 OCEAN STREET
CITY-ST-ZIP LYNN MA 01902 ☒ Delete

TITLE AC
NAME BERNARDI, ARLEEN M
STREET ADDRESS 22 WESTVALE RD.
CITY-ST-ZIP MILTON MA 02186 ☒ Delete

TITLE AC
NAME BERNARDI, ARLEEN M
STREET ADDRESS 22 WESTVALE RD.
CITY-ST-ZIP MILTON MA 02186 ☒ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME DANIEL J. BRADLEY
STREET ADDRESS TWO SEAPORT LANE
CITY-ST-ZIP Boston, MA 02210-3021 ☒ Change ☐ Addition

TITLE VP
NAME ALEX BURLEIGH
STREET ADDRESS TWO SEAPORT LANE
CITY-ST-ZIP Boston, MA 02210-3021 ☐ Change ☒ Addition

TITLE T
NAME JONATHAN MARTIN
STREET ADDRESS TWO SEAPORT LANE
CITY-ST-ZIP Boston, MA 02210-3021 ☒ Change ☐ Addition

TITLE V
NAME JAMES FINNEGAN
STREET ADDRESS TWO SEAPORT LANE
CITY-ST-ZIP Boston, MA 02210-3021 ☒ Change ☐ Addition

TITLE AC
NAME WILLIAM ALBANESE
STREET ADDRESS TWO SEAPORT LANE
CITY-ST-ZIP Boston, MA 02210-3021 ☒ Change ☐ Addition

TITLE ☐ Change ☐ Addition

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 9/7/01

Daytime Phone #

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90017 029 ***550.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (5/01)