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Jun 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Merham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000044720 (6)

1. Corporation Name
EASTRICH NO. 187 CORPORATION



Principal Place of Business
C/O ALDRICH, EASTMAN & WALTCH, L.P.
225 FRANKLIN ST.
BOSTON MA 02110

Mailing Address
C/O ALDRICH, EASTMAN & WALTCH, L.P.
225 FRANKLIN ST.
BOSTON MA 02110-2804

3. Date Incorporated or Qualified 05/24/1996	3a. Date of Last Report
4. FEI Number 58-2242663	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		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	

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PD	1.1 TITLE	P
NAME	PARKER, RANDY J	1.2 NAME	Husid, Alison L
STREET ADDRESS	C/O ALDRICH, EASTMAN, 225 FRANKLIN ST.	1.3 STREET ADDRESS	C/O AEW Capital Mgt 225 Franklin St
CITY-ST-ZIP	BOSTON MA 02110	1.4 CITY-ST-ZIP	Boston, MA 02110
TITLE	VSD	2.1 TITLE	
NAME	MONAHAN, J. GRANT	2.2 NAME	
STREET ADDRESS	C/O ALDRICH, EASTMAN, 225 FRANKLIN ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA 02110	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	
NAME	ALBERT, THOMAS K	3.2 NAME	
STREET ADDRESS	C/O ALDRICH, EASTMAN, 225 FRANKLIN ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA 02110	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	LAGERLUND, KARIN J	4.2 NAME	
STREET ADDRESS	C/O ALDRICH, EASTMAN, 225 FRANKLIN ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA 02110	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	T
NAME	BIEBUSCH, DOREEN M	5.2 NAME	David D. Puygar
STREET ADDRESS	C/O ALDRICH, EASTMAN, 225 FRANKLIN ST.	5.3 STREET ADDRESS	C/O AEW Capital Mgt. 225 Franklin St.
CITY-ST-ZIP	BOSTON MA 02110	5.4 CITY-ST-ZIP	Boston, MA 02110
TITLE	S	6.1 TITLE	
NAME	BERNARDI, ARLEEN M	6.2 NAME	
STREET ADDRESS	C/O ALDRICH, EASTMAN, 225 FRANKLIN ST.	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA 02110	6.4 CITY-ST-ZIP	

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 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: _____ 4/17/97 617-261-9594

CR2E034 (9/96)