

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

•95744•

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer Lawrence J. Murphy Date 1/25/05

Print or Type Name of Officer Lawrence J. Murphy

Treasurer/Clerk _____

Title of Officer _____

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID NO. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Names/Addresses of the Officers: (continued from first page)

Vice-President

Carol MacDonald

100 Grandview Road, Suite 207

Braintree, MA 02184

Vice-President

Kevin S. Young

100 Grandview Road, Suite 207

Braintree, MA 02184



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 95744		2. Name of Corporation CORCORAN MANAGEMENT COMPANY, INC.			
3. Street Address Principal Business Office 100 Grandview Road, Suite 207			City Braintree	State MA	Zip 02184
4. Business Phone No. 781-849-0011		5. State of Incorporation MASSACHUSETTS			6. SIC Code 5579
7. Brief Description of the Character of Business Conducted in Rhode Island TO MANAGE REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Peter J. Blampied			Vice President Name Richard J. High		
Street Address 100 Grandview Road, Suite 207			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
Director Name John M. Corcoran, Jr.			Director Name Thomas M. Corcoran		
Street Address 100 Grandview Road, Suite 207			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
Director Name Leo J. Corcoran			Director Name John F. Corcoran		
Street Address 100 Grandview Road, Suite 207			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
12,500 COMM \$0.01 PAR VALUE			2000		
200,000 Shares - No par value			18000		
Class/Series			Class/Series		
Voting Common Class A			Non-Voting Class B		
Par Value			Par Value		
\$20.00			None		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 7 4 4 *

File Date 2/19/04
Check No. 382258
By: EC

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Lawrence J. Murphy

Print or Type Name of Officer

Treasurer/Clerk

Title of Officer

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID NO. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Names/Addresses of the Officers: Continued from first page:

Vice-President

Carol MacDonald
100 Grandview Road, Suite 207
Braintree, MA 02184

Vice-President

Kevin S. Young
100 Grandview Road, Suite 207
Braintree, MA 02184

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

95744

2. Name of Corporation

CORCORAN MANAGEMENT COMPANY, INC.

3. Street Address Principal Business Office

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

4. Business Phone No.

781-849-0011

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

5579

7. Brief Description of the Character of Business Conducted in Rhode Island

Manages apartment complex in Johnston, RI called Arbor Hill Apartments.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Peter J. Blampied

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

Vice President Name

Richard J. High

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

X ~~XXXXXXXXXX~~ Asst. Treasurer/Asst. Clerk Name:

Karen A. Sjoquist

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

Treasurer Name & Clerk Name:

Lawrence J. Murphy

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

John M. Corcoran, Jr.

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

Director Name

Thomas M. Corcoran

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

Director Name

Leo J. Corcoran

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

Director Name

John F. Corcoran

Street Address

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

12,500 COMM \$0.01 PAR VALUE

200,000 Shares - No par value

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

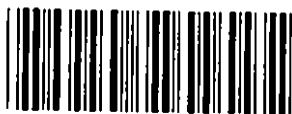
Class/Series

Par Value

2000 Voting Common Class A \$20.00

18000 Non-Voting Class B None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 7 4 4 *

File Date:

2-18-03

Check No.:

354786

By:

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Lawrence J. Murphy

Print or Type Name of Officer

Treasurer/Clerk

Title of Officer

Date

2/3/03

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID NO. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Names/Addresses of the Officers: Continued from First Page:

Vice-President

Carol MacDonald
100 Grandview Road, Suite 207
Braintree, MA 02184

Vice-President

Kevin Young
100 Grandview Road, Suite 207
Braintree, MA 02184



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 95744 2. Name of Corporation CORCORAN MANAGEMENT COMPANY, INC.
3. Street Address Principal Business Office 100 Grandview Road, Suite 207 City Braintree State MA Zip 02184
4. Business Phone No. 781-849-0011 5. State of Incorporation MASSACHUSETTS 6. SIC Code 5579

7. Brief Description of the Character of Business Conducted in Rhode Island
Manages apartment complex in Johnston, RI called Arbor Hill Apartments.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) XX FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Peter J. Blampied	Vice President Name Richard J. High
Street Address 100 Grandview Road, Suite 207	Street Address 100 Grandview Road, Suite 207
City Braintree State MA Zip 02184	City Braintree State MA Zip 02184
Asst. Treasurer/Asst. Clerk Name: Karen A. Sjoquist	Treasurer Name & Clerk Name: Lawrence J. Murphy
Street Address 100 Grandview Road, Suite 207	Street Address 100 Grandview Road, Suite 207
City Braintree State MA Zip 02184	City Braintree State MA Zip 02184

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) XX FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name John M. Corcoran	Director Name John M. Corcoran, Jr.
Street Address 100 Grandview Road, Suite 207	Street Address 100 Grandview Road, Suite 207
City Braintree State MA Zip 02184	City Braintree State MA Zip 02184
Director Name P. Leo Corcoran	Director Name Thomas M. Corcoran
Street Address 100 Grandview Road, Suite 207	Street Address 100 Grandview Road, Suite 207
City Braintree State MA Zip 02184	City Braintree State MA Zip 02184

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
12,500	COMM	\$0.01 PAR VAL

200,000 Shares - No par value

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
2000	Voting Common Class A	\$20.00
18000	Non-Voting Class B	None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 7 4 4 *

File Date: 2-27-02

Check No.: 324071

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2/27/02
Signature of Officer Date

Lawrence J. Murphy

Print or Type Name of Officer

Treasurer/Clerk

Title of Officer

5

Form 630 12/01

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STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID NO. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Names/Addresses of the Officers - Continued from First Page:

Vice-President

Carol MacDonald
100 Grandview Road, Suite 207
Braintree, MA 02184

Vice-President

Kevin Young
100 Grandview Road, Suite 207
Braintree, MA 02184

Names/Addresses of the Directors - Continued from First Page:

Leo J. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184

John F. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 95744		2. Name of Corporation CORCORAN MANAGEMENT COMPANY, INC.	
3. Street Address Principal Business Office 100 Grandview Road, Suite 207		City Braintree	State MA
4. Business Phone No. (781) 849-0011		5. State of Incorporation MASSACHUSETTS	
6. SIC Code 5579			
7. Brief Description of the Character of Business Conducted in Rhode Island Manages apartment complex in Johnston, RI called Arbor Hill Apartments.			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Peter J. Blampied		Vice President Name Richard J. High	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
Asst. Treasurer/Asst. Clerk Name Virginia A. Olson		Treasurer Name & Clerk Name Lawrence J. Murphy	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) XX FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name John M. Corcoran		Director Name John M. Corcoran, Jr.	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
Director Name P. Leo Corcoran		Director Name Thomas M. Corcoran	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
12,500 COMM \$0.01 PAR VAL		2000	Voting Common Class A \$20.00
200,000 Shares - no par value		18000	Non-Voting Class B None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 7 4 4 *

File Date: 2/9/01

Check No.: 294251

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature] Date: 1/31/01

Lawrence J. Murphy
Print or Type Name of Officer

Treasurer/Clerk

Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID NO. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Names/Addresses of the Officers - Continued from First Page:

Vice-President

Carol MacDonald
100 Grandview Road, Suite 207
Braintree, MA 02184

Vice-President

Kevin Young
100 Grandview Road, Suite 207
Braintree, MA 02184

Names/Addresses of the Directors - Continued from First Page:

Leo J. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184

John F. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

95744

2. Name of Corporation

CORCORAN MANAGEMENT COMPANY, INC.

3. Street Address Principal Business Office

100 Grandview Road, Suite 207

City

Braintree

State

MA

Zip

02184

4. Business Phone No.

781-849-0011

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

5579

7. Brief Description of the Character of Business Conducted in Rhode Island

Manages apartment complex in Johnston, RI called Arbor Hill Apartments.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

Peter J. Blampied

Vice President Name

Richard J. High

Street Address

100 Grandview Road, Suite 207

Street Address

100 Grandview Road, Suite 207

City State Zip

Braintree

MA

02184

City State Zip

Braintree

MA

02184

~~Secretary~~ Asst. Treasurer/Asst. Clerk Name

Virginia A. Olson

Treasurer Name & Clerk Name

Lawrence J. Murphy

Street Address

100 Grandview Road, Suite 207

Street Address

100 Grandview Road, Suite 207

City State Zip

Braintree

MA

02184

City State Zip

Braintree

MA

02184

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **X FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

John M. Corcoran

Director Name

John M. Corcoran, Jr.

Street Address

100 Grandview Road, Suite 207

Street Address

100 Grandview Road, Suite 207

City State Zip

Braintree

MA

02184

City State Zip

Braintree

MA

02184

Director Name

P. Leo Corcoran

Director Name

Thomas M. Corcoran

Street Address

100 Grandview Road, Suite 207

Street Address

100 Grandview Road, Suite 207

City State Zip

Braintree

MA

02184

City State Zip

Braintree

MA

02184

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

12,500 COMM \$0.01 PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

2000

Common

\$20.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 7 4 4 *

File Date: 2-23-00

Check No.: 263274

By: Lawrence J. Murphy

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Lawrence J. Murphy
Signature of Officer Date

Lawrence J. Murphy
Print or Type Name of Officer

Treasurer/Clerk
Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID No. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Names & Addresses of the Directors - Continued from First Page:

Leo J. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184

John F. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 95744		2. Name of Corporation CORCORAN MANAGEMENT COMPANY, INC.			
3. Street Address Principal Business Office 100 Grandview Road, Suite 205		City Braintree	State MA	Zip 02184	
4. Business Phone No. 781-849-0011		5. State of Incorporation MASSACHUSETTS			6. SIC Code 5579
7. Brief Description of the Character of Business Conducted in Rhode Island Manages apartment complex in Johnston, RI called Arbor Hill Apartments.					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Peter J. Blampied			Treasurer Name Lawrence J. Murphy		
Street Address 100 Grandview Road, Suite 205			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
XXXXXX Clerk Name Lawrence J. Murphy			XXXXXX Asst. Treasurer/Asst. Clerk Name Rosemary Eacobacci		
Street Address 100 Grandview Road, Suite 207			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John M. Corcoran			Director Name John M. Corcoran, Jr.		
Street Address 100 Grandview Road, Suite 207			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
Director Name P. Leo Corcoran			Director Name Thomas M. Corcoran		
Street Address 100 Grandview Road, Suite 207			Street Address 100 Grandview Road, Suite 207		
City Braintree	State MA	Zip 02184	City Braintree	State MA	Zip 02184
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
12,500 COMM \$0.01 PAR VAL			2000	Common	\$20

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: **Feb 12, 1999**

Check No.: **029870**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] **2/3/99**
Signature of Officer Date

Lawrence J. Murphy

Print or Type Name of Officer

Treasurer/Clerk

Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

CORCORAN MANAGEMENT COMPANY, INC.
CORPORATE ID NO. 95744

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Names & Addresses of the Directors - Continued from First Page:

Leo J. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184

John F. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 95744		2. Name of Corporation CORCORAN MANAGEMENT COMPANY, INC.	
3. Street Address Principal Business Office 100 GRANDVIEW ROAD, SUITE 205		City BRAINTREE	State MA
4. Business Phone No. 781-849-0011		5. State of Incorporation MASSACHUSETTS	Zip 02184
6. SIC Code 5579			
7. Brief Description of the Character of Business Conducted in Rhode Island Manages apartment complex in Johnston, Rhode Island called Arbor Hill Apartments			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name T. Robert Pickette		Treasurer Name Lawrence J. Murphy	
Street Address 100 Grandview Road, Suite 205		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
Clerk Name Lawrence J. Murphy		Asst. Treasurer/Asst. Clerk Name Rosemary Eacobacci	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) X			
Director Name John M. Corcoran		Director Name P. Leo Corcoran	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
Director Name John M. Corcoran, Jr.		Director Name Thomas M. Corcoran	
Street Address 100 Grandview Road, Suite 207		Street Address 100 Grandview Road, Suite 207	
City Braintree	State MA	City Braintree	State MA
Zip 02184		Zip 02184	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
12,500 COMM \$0.01 PAR VAL		2000	Common
Par Value		Par Value	
		\$20	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 9 5 7 4 4 *

File Date: **2-18-98**
Check No.: **198633**
By: **1VP**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: **Lawrence J. Murphy** Date: **2/5/98**
Print or Type Name of Officer: **Lawrence J. Murphy, Treasurer/Clerk**
Title of Officer: **Treasurer/Clerk**

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

CORPORATION: CORCORAN MANAGEMENT COMPANY, I NC.

CORPORATE ID #: 95744

ATTACHMENT TO SECTION 9. NAMES AND ADDRESSES OF THE DIRECTORS

John F. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184

Leo J. Corcoran
100 Grandview Road, Suite 207
Braintree, MA 02184