

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Moftam Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 FEB 13 AM 9:39 			
1. Name of Limited Partnership TREEHOUSE VILLAGE PROPERTIES, LP		1a. DOCUMENT # B96000000370		3. Date Formed or Registered 09/23/1996 3a. Date of Last Report 04/07/1997 4. State or Country of Formation IN 5a. Capital Contributions as Shown on record. \$1,000.00 5b. Amount of Capital Contributions in FLORIDA to date: 6. FEI Number 58-3363640 ☐ Applied For ☐ Not Applicable 7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
2. Mailing Address 1030 NORTH COLLEGE AVENUE INDIANAPOLIS IN 46202		2a. Principal Office Address 1030 NORTH COLLEGE AVENUE INDIANAPOLIS IN 46202					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip Country		Zip Country		9. Name and Address of Current Registered Agent MIZER, KAREN 117 SOUTHEAST 16TH AVENUE GAINESVILLE FL 32601 10. If changed, new Registered Agent/Office Name _____ Street Address (P.O. Box Number Is Not Acceptable) _____ Suite, Apt. #, etc. _____ City _____ FL Zip Code _____ 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) _____ A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
11. Name(s) of General Partner(s) TREEHOUSE VILLAGE ASSOCIATES		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1030 NORTH COLLEGE AV				11b. City, State & Zip Code INDIANAPOLIS IN 46202	
11c. Registration/Document Number G96267900063		11d. FEI Number 58-3363640				11e. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
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