FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

98 DEC 10 PM 1: 13

SUNBELT MANOR ASSOCIATES, A LIMITED PARTNERSHIP Making Address	1. Name of Limited Partnership		1a. DOCUM A12503	ENT#				
P.O. BOX 40177 INDIANAPOLIS IN 46869 INDIANAPOLIS IN INDIANA	SUNBELT MANOR	ASSOCIATES	, A LIMITED PARTN	IERSHI	P			
P.O. BOX 40177 INDIANAPOUS IN 46890- INDIANAPOUS IN I	Mailing Address		Principal Office Address	<u> </u>		3. Date Formed or Registered	5a. Capit	al Contributions as
2. Mailing Address 2a. Principal Office Address 2a. Principal Office Address 2a. Principal Office Address 2buile, Apt. #, etc. 5b. Subsection of Country 4. State or Country of Formation FL 5c; FEI Number 5b. Amount of Capital Condent forms in FLORIDA to desire in FLORIDA Condent forms in FLORIDA CONDENT for Fact for Fact forms in FLORIDA CONDENT for Fact forms in FLORIDA CONDENT for Fact forms in FLORIDA CONDENT for Fact for Fact forms in FLORIDA CONDENT for Fact for Fact forms in FLORIDA CONDENT for Fact for Fact for Fact forms in FLORIDA CONDENT for Fact for Fact for Fact forms in FLORIDA CONDENT for Fact for F	P.O. BOX 40177		P.O. BOX 40177			05/12/1982		
2. Mailing Address 2. A. Butte or Country of Formation FL Contributions in FLORIDA to date: Suite, Apt. #, etc. 5. FEI Number 59-2202771	Indianapolis in 46260-	Indianapolis in 46260		12/05/1		·		
2. Mailing Address							5b. Amou	int of Capital ibutions in FLORIDA
Suite, Apt. #, etc. City & State To Country 46240 R. Make check payable to: Dept. of State (See reverse side for fee information of the information of	2. Mailing Address		2a. Principal Office Address			•	10 08:	e.
City & State City & State City & State To Country 46240 South Part	Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. FEI Number	Applied For	
Zip	City & State		City & State					
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Sules Aget. #, etc. City FL Zip Code City FL Zip Code To pursuant to the provisions of sections 820,1051 and 820,192, Florids Statutes, the above-named limited partnership organized or registered under the laws of the State of Florids, such change was authorized by its general partner(s). I horeby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 820,192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) GLICK, EUGENE B 215 WILLIAMS COURT INDIANAPOLIS IN INDIANAPOLIS IN INDIANAPOLIS IN INDIANAPOLIS IN INDIANAPOLIS IN INDIANAPOLIS IN		Country Zip Country			Fee Required		Fee Required	
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PLANTATION FL 33324 Suite, Apt. #, etc. City FL Zip Code 10a. Pursuant to the provisions of sections 520, 1051 and 520, 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, such in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the obligations of section 520, 192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) GLICK, EUGENE B 215 WILLIAMS COURT INDIANAPOLIS IN SUIte, Apt. #, etc. Zip Code The Laws of Florida, submiss this state of Florida, Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submiss this state of Florida. Such changes was authorized by its general partner(s). I hereby accept the above the State of Florida, submiss this state of Florida. Statutes, the State of Florida statutes, the Address of Florida Statutes, the State of Florida Stat	CT CORPORATION SYSTEM							
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-12/18/9301101007 ****526.25 ****526.2	GINCK, MARILYN K		215 WILLIAMS COURT		Indianapolis in			
Note: General partners MAY NOT be changed on this form: an amendment must be filed to change a general partn				į		-12/11	3/9301	[101UU7
	Note: General partne	ers MAY NOT b	e changed on this form	; an am	 endmei	nt must be filed to ch	ange a ge	eneral partner.
12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicates this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or the empowered to execute this report as required by chapter 620, Florida Statutes.								
SIGNATURE CLASUS SUCE DATE 12-7-98	Corporations from any liability of this annual report is true and ac	f non-compliance with Sec curate and that my signatu	tion 119.07(3)(k) in the event that the info re shall have the same legal effects as if	rmation suppl	lied is deeme	ed exempt from public access. I furthe	r certify that the	information indicated on
Eugene B. Glick, General Partner Typed or Printed Name of General Partner Signing Form Devilme Telephone Number 317/469-0400	Corporations from any tiability of this annual report is true and ac empowered to execute this report annual report is true and acceptable to empowered to execute this report annual report is true and acceptable to empowered to execute this report annual report is true and acceptable to empowered to execute this report annual report is true and acceptable to empowered to execute this report annual report is true and acceptable to empowered to execute this report annual report is true and acceptable to empowered to execute this report annual report is true and acceptable to execute this section is annual report is empowered to execute this empowered to execute this execute this execute execute this execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute execute	f non-compliance with Sec curate and that my signatu	tion 119.07(3)(k) in the event that the info re shall have the same legal effects as if	rmation suppl	lied is deeme	d exempt from public access. I furthe certify that I am a General Partner or	r certify that the	information indicated on