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

LIMITED PARTNERSHIP ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a. DOCUMENT # **A21188** SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 15 AM 10: 35



DEER CHASE ASSOCIATES, LTD.				* *************************************		
				\$12/17		
Mailing Address		Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.	
7321 SHADELAND STATION. #220 INDIANAPLOIS IN 46256		7321 SHADELAND STATION. #3	7321 SHADELAND STATION. #220 INDIANAPLOIS IN 46256		\$1,427,500.00	
		INDIANAPLOIS IN 46256				
			28. Principal Office Address		5b. Amount of Capital Contributions in Ft ORIDA to date:	
2. Mailing Addr	rose	28. Principal Office Address				
ar moning receives		24. Thiogram of National	- Timelyan Smoothaaras			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For	
City & State		City & State	City & State		Not Applicable	
				7. Certilicate of Status Desired	\$8.75 Addit-anal	
Zip	Country	Žip	Country	8. Make check payable to: Dept. or	State (See reverse side for fee information	
			·			
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office Name			
ROBBINS, DE			Street Addis	ess (P.O. Box Number Is Not Acceptable)		
4400 N.W. 61			Suite, Apt. #, etc.			
DEEKHELD E	BEACH FL 33442					
			City		FL Zip Code	
for the purp agent. I am SIGNATURE (Regist	pose of changing its registered offen familiar with, and accept the oblig formal agent Accepting Appointment	ice or registered agont, or both, in the State of I gations of soction 620,192, Florida Statutus. http://doi.org/10.100/pdf	Florida. Such chan	ership organized or registered under the laws of f ige was authorized by its general partner(s). The	eby accept the appointment of registered	
A GENE	RAL PARTNER TH M	AT IS A CORPORATION, UST BE REGISTERED A	, LIMITED ND ACTIV	PARTNERSHIP OR OTHE VE WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Namo(s)) of Gonoral Partner(s)	Address of Each Gen (Do NOT Use Post Office	eral Partner Box Numbers)	11b. City, State 8 7ip Code	11c. Registration/ Document Number	
MARK III DEVELOPMENT GROUP,		7321 SHADELAND STA	TIO	INDIANAPLOIS IN 46256	B9700000137	
•				400002 -12/2 ****	1 504 — 21 3/9701120010 541.25 ****541.25	
1						
4						

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. Edo hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Trelease 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 indicated on this annual report is true and accurate and that my signature shall have the same logal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 500. Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Charles A. Pechette

DATE: 12-8-97

Daylime Telephone Number . (317) 579-0500

OR2E003 (6/97