

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. Mortham Secretary of State DIVISION OF CORPORATIONS
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**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

97 DEC 29 PM 2:30

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1. Name of Limited Partnership FOGELMAN ENTERPRISES, LIMITED PARTNERSHIP	1a. DOCUMENT # A25022
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Mailing Address 5400 POPLAR AVE. MEMPHIS TN 38119	Principal Office Address 5400 POPLAR AVE. MEMPHIS TN 38119
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country

3. Date Formed or Registered 08/11/1987	5a. Capital Contributions as Shown on record \$0.00
3a. Date of Last Report 12/23/1996	5b. Amount of Capital Contributions in FLORIDA to date \$
4. State or Country of Formation DE	6. FEI Number 62-1317805
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

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

10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City State Zip Code
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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) N/A DATE _____

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) FOGELMAN LIMITED PARTSHP	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 5400 POPLAR AVE.	11b. City, State & Zip Code MEMPHIS TN	11c. Registration/Document Number A25021
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do 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. 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 indicated on 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 trustee empowered to execute this report as required by chapter 620, Florida Statutes.

By: Fogelman Limited Partnership, its general partner
 By: Fogelman Properties, Inc., its general partner
 By: John A. Randles, III, its EVP
 SIGNATURE JOHN A. RANDLES, III DATE 12/19/97
 Typed or Printed Name of General Partner Signing Form: JOHN A. RANDLES, III Daytime Telephone Number: (901) 767-6500

CR2E003 (6/97)