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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



PLANTATION MALL DEVELOPERS LIMITED PARTNERSHIP

LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A26969

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 29 AMII: 22



Mailing Address	Principal Office Address P.O. BOX 7066		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
P.O. BOX 7066			08/30/1988	\$4,404,090.00
Tax Dept. Indianapolis in 46207	TAX DEPT.		3a. Date of Last Report	φ+,+υ+,υσυ,υυ
INDIANAPOLIS IN 4020/	Indianapolis in 46207		01/03/1997	5b. Amount of Capital Contributions in FLORIDA
2. Malling Address	2a. Principal Office Address		4. State or Country of Formation	# 4,404,090,00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 35-1700361	Applied For
City & State	City & State			Not Applicable
Zip Country	Zip	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required
			8. Make check payable to: Dept	of State (See reverse side for fee informa
1200 S. PINE ISLAND ROAD		10. If changed, new Registered Agent/Office		
		Name		
		Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt. #, etc.		
I BANTATION I E COOLY				
10a. Pursuant to the provisions of sections 620 105	of and 620,192, Florida Statules, the above or projected among or both in the Sta	City ve-named I mited partner	ship organized or registered under the laws or owns authorized by its general partner(s). If	FL Zip Code The State of Florida, submits this statement of the statement
10a. Pursuant to the provisions of sections 6/0 105 for the purpose of changing its registered office agent. I am familiar with, and accord the obliging the following section of the purpose of the purp	ze or registered agent, or both, in the Sta ations of section 620, 192, Florida Statute II) AT IS A CORPORATIO	City ve-named I mitted partners title of Florida. Such chang is	o was authorized by its general parlnor(s). If DA PARTNERSHIP OR OTH	FL of the State of Florida, submits this statem are the appointment of registers.
10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registored office agent. I am familiar with, and accept the obliging SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THATMENT MU	ce or registered agent, or both, in the Stations of section 620, 192, Florida Statute AT IS A CORPORATIO JST BE REGISTERE!	City Inve-named Imited partners title of Florida. Such chang is ON, LIMITED I	DAPARTNERSHIP OR OTH	FL of the State of Florida, submits this statem are by accept the appointment of register. ER BUSINESS ENTIT Hogistration/
Oa. Pursuant to the provisions of sections 620 105 for the purpose of changing its registored office agent. I am familiar with, and accept the obliging signature. A GENERAL PARTNER THAM II. Name(s) of General Partner(s)	ations of section 620, 192, Florida Statute AT IS A CORPORATIO JST BE REGISTERE 11a. (Do NOT Use Post	City we-named I mitted partners te of Florida. Such chang is ON, LIMITED I OND ACTIVI General Partner Office Box Numbers	DATE OFFICE. Output DATE OFFICE Output DATE DATE	FL of the State of Florida, submits this statement of register accept the appointment of register it. ER BUSINESS ENTIT
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10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registored office agent. I am familiar with, and accept the obliging SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THAT MULTING MARKES) of General Partner(s) PLANTATION-SIMON, INC.	ations of section 620, 192, Florida Statute AT IS A CORPORATION JST BE REGISTERE 11a. (Do NO) Uso Post	City Inversame of Inited partners the of Florida. Such changes ON, LIMITED ID AND ACTIVI Office Box Numbers IN STRE ON ST.	DAY PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code INDIANAPOLIS IN	FL of the State of Florida, submits this statemereby accept the appointment of registers. ER BUSINESS ENTITED TO THE STATEMENT OF THE STATEME
10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registored office agent. I am familiar with, and accept the obliging SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THAT MULTING METERS). 11. Name(s) of General Partner(s) PLANTATION-SIMON, INC. SIMON, HERBERT	ations of section 620, 192, Florida Statute AT IS A CORPORATION JST BE REGISTERE 11a. (Do NOT Uso Post) 115 W. WASHINGT	City Inversame of Inited partners the of Florida. Such changes ON, LIMITED ID AND ACTIVI Office Box Numbers IN STRE ON ST.	DAY PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City. State & Zip Code INDIANAPOLIS IN INDIANAPOLIS IN 46204 INDIANAPOLIS IN 46204	FL of the State of Florida, submits this statemereby accept the appointment of registers. ER BUSINESS ENTITED Hegistration/Document Number

SIGNATURE $_{\it HS}$

Typed or Printed Name of General Partner Signing Form

HERBERT SIMON

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 refease the Division of

Corporations from any liability of non-complance 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 massignature 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 trusted empowered to execute this report as fequined by displet 620. Fiorida Statutes.

12/9/97

Daytime Telephone Number 317-263 - 2282