

**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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC 31 PM 3:08



1. Name of Limited Partnership  
**BYHALL LIMITED PARTNERSHIP**

1a. DOCUMENT #  
**B93000000485**

Mailing Address * LEGAL DEPT. 600 E. LAS COLINAS BLVD., SUITE 1900 IRVING TX 75039	Principal Office Address * REAL ESTATE DEPT. 85 BROAD ST., 19TH FLOOR NEW YORK NY 10004
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 11/12/1993	5a. Capita Contributions as Shown on record \$4,600,000.00
3a. Date of Last Report 01/27/1997	5b. Amount of Capita Contributions in FLORIDA to date \$5,604,242
4. State or Country of Formation DE	6. FLI Number 75-2634414 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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  
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.**  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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) \_\_\_\_\_ 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) <b>NEW BYHALL CORP.</b>	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <b>100 CRESCENT CT, STE</b>	11b. City, State & Zip Code <b>DALLAS TX 75201</b>	11c. Registration/Document Number <b>F96000001289</b>
(437.50 103.75)		dec	

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-01/12/98--01009--022  
\*\*\*2291.25 \*\*\*541.25

**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.

SIGNATURE Richard Frapart DATE 12-24-97  
Richard Frapart, Vice President of the General Partner 972/831-2200  
Typed or Printed Name of General Partner Signing Form Daytime Telephone Number

C92E003 (6/97)