

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership	1a. DOCUMENT # B93000000512
GLIMCHER PROPERTIES LIMITED PARTNERSHIP	

2. Mailing Address		2a. Principal Office Address	
20 SOUTH THIRD STREET COLUMBUS OH 43215		20 SOUTH THIRD STREET COLUMBUS OH 43215	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

3. Date Formed or Registered 11/24/1993	5a. Capital Contributions as Shown on record \$57,453,867.00
3a. Date of Last Report 04/03/1998	5b. Amount of Capital Contributions in FLORIDA to date: 61,776,832
4. State or Country of Formation DE	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. FEI Number 31-1390925	<input type="checkbox"/> \$8.75 Additional Fee Required
7. Certificate of Status Desired <input type="checkbox"/>	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 SOUTH 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

FF \$526.25

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
GLIMCHER PROPERTIES CORPORAT	20 SOUTH THIRD STREET	COLUMBUS OH 43215	F93000004593
31-1390925-39249-17 04/14/99-01075-018 ***2276.25 ****526.25			

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	<i>George M. Harmanis</i>	DATE	3/31/99
Typed or Printed Name of General Partner Signing Form	George M. Harmanis	Daytime Telephone Number	(614) 621-4000

CR2E003 (12/98)