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

1. Name of Limited Partnership

SIGNATURE ___

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DOCUMENT # **B9300000570**

SIMON DEBARTOLO GROUP, L.P.

8500

FILED DIVISION OF CORPORATIONS

97 DEC 22 PM 4: 05



	02		(X)12/29		
Mailing Address	Principal Office Address		3. Date Formed or Registered	58, Capital Contributions as Shown on record.	
IATIONAL CITY CENTER	NATIONAL CITY CENTER 115 W. WASHINGTON STREET, SUITE 15-E INDIANAPOLIS IN 46204		12/21/1993	12/21/1993 \$23,338,000.00	
15 W. WASHINGTON STREET, SUITE 15-E			L		
ndianapolis in 46204			12/13/1996	5b, Aniou	5b. Amount of Capital Contributions in Ft ORIDA to date:
			4. State or Country of Formation	Contri to dat	ibutions in Ft ORIDA e:
2. Malling Address	2a. Principal Office Address		DE	\$23,338,000,00	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 34-1755769	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Zip Country		Make check payable to: Dept. of State (See reverse side for fee information		
	1,2,1,7,				
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD		Name Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324		Suite, Apt. #, etc.			
	City		7ip Code		
		Oity		FL	7 ip Code
10a. Pursuant to the provisions of sections 620.105 for the purpose of changing its registered office agent. I am familiar with, and accept the oblig	e or registered agent, or both, in the State of Flo				
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen	ce or registered agent, or both, in the State of Flo alions of section 620.192, Florida Statutes. 1) . AT IS A CORPORATION, I JST BE REGISTERED AN	LIMITED PA	as authorized by its general partner(s). I her DATE ARTNERSHIP OR OTHE	eby accept the	appointment of registered
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen	ce or registered agent, or both, in the State of Flo allons of section 620.192, Florida Statutes. 1)	LIMITED PA	as authorized by its general partner(s). I her DATE ARTNERSHIP OR OTHE WITH THIS OFFICE.	eby accept the	appointment of registered
for the purpose of changing its registered office agent. I am familiar with, and accopt the obliging signature (Registered Agent Accepting Appointment A GENERAL PARTNER THAT ME	the or registered agent, or both, in the State of Flo allons of section 620.192, Florida Statutes. AT IS A CORPORATION, I JST BE REGISTERED AN	LIMITED PAD ACTIVE STATES Numbers) 11	as authorized by its general partner(s). I her DATE ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSII	appointment of registered NESS ENTITY Registration/
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig signature (Registered Agent Accepting Appointment A GENERAL PARTNER THAT MILLS IN MARKES) of General Partner(s)	to or registered agent, or both, in the State of Floations of section 620.192, Florida Statutes. AT IS A CORPORATION, I JST BE REGISTERED AN Address of Fach Genore (Do NOT Use Post Office Both Good Control of the State of State	LIMITED PAD ACTIVE SI Pariner ox Numbers)	DATE ARTNERSHIP OR OTHE WITH THIS OFFICE. b. City, State & Zip Code	ER BUSII	Appointment of registered NESS ENTITY Registration/ Document Number
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig signature (Registered Agent Accepting Appointment A GENERAL PARTNER THAM MI. Name(s) of General Partner(s) SIMON DEBARTOLO GROUP, INC.	to or registered agent, or both, in the State of Floations of section 620.192, Florida Statutes. AT IS A CORPORATION, I JST BE REGISTERED AN 11a. (Do NOT Use Post Office Both 115 W. WASHINGTON ST	LIMITED PAD ACTIVE SI Pariner ox Numbers)	DATE ARTNERSHIP OR OTHE WITH THIS OFFICE. b. City, State & Zip Code INDIANAPOLIS IN 46204 INDIANAPOLIS IN 46204	R BUSII 11c. F93 F93 3351	NESS ENTITY Registration/ Document Number 000005528
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER THAT MILES IN THE MILES AGENT OF THE MILES IN TH	to or registered agent, or both, in the State of Floations of section 620.192, Florida Statutes. AT IS A CORPORATION, I JST BE REGISTERED AN 11a. (Do NOT Use Post Office Both 115 W. WASHINGTON ST	LIMITED PAD ACTIVE SI Partner ox Numbers)	DATE NATIVE SHIP OR OTHE WITH THIS OFFICE. b. City, State & Zip Code INDIANAPOLIS IN 46204 INDIANAPOLIS IN 46204 *****54	## BUSII 11c. F93 F93 3 3 5 1 7 9 7 — 011	####\$41.25

DATE 12-17-97 Typed or Printed Name of General Partner Signing Form HERBERT SIMON, S.D. PROPERTY GROW, Daylime Telephone Number 317-263-2282