## 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

1. Name of Limited Partnership

DOCUMENT # **B9400000101** 

99 FEB 16 All 9:38



	D0400000101			
ISPEN - INDIAN PROJECT LIMITED PARTNERSHIP		( 1861)81 (616 1611) BYRTH BRITH BBTH BRITH BRITH BRITH BRITH BRITH BRIDH FIGHT BRIDH FIRM TH		
ailing Address	Principal Office Address		3. Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record
31700 MIDDLEBELT ROAD. SUITE 145 FARMINGTON HILLS MI 48334		31700 MIDDLEBELT ROAD. SUITE 145 FARMINGTON HILLS MI 48334		\$9,000,000.00
TRANSPORT FREE M. 4004	CAMBINO ON CREED BY 7000			5b. Amount of Capital Contributions in FLORIDA
. Mailing Address	2a. Principal Office Address		4. State or Country of Formalion	A, wo, ow. w
uite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For Not Applicable
ity & State	City & State			\$8.75 Additional Fee Required
Zip Country	Zip Co	ountry	8. Make check payable to Depl. o	f State (See reverse side for fee information
9. Name and Address of Co	urrent Registered Agent		10. If changed, new Registered	Agent/Office
CT CORPORATION SYSTEM		Name		
1200 SOUTH PINE ISLAN RD.		Street Address (P.C	D Box Number Is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
PLANTATION FL 33324	,	Suite, Apt #, etc		
		City		Zip Code
for the purpose of changing its registered office agent. I am familiar with, and accept the obliging sensitive of the country	•	Such change was a	authorized by its general partner(s) Thore  DATE  RTNERSHIP OR OTH	by accept the appointment of registered
Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box No			11c. Registration/ Document Number
SUN GP L.L.C.	31700 MIDDLEBELT ROA		FARMINGTON HILLS MI 4	M9600000098
			-02/19	17 1 1 4 10 5 17 9 01 096 005 17 1
				2
Note: General partners MAY N	IOT be changed on this form:	an amendo	nent must be filed to ch	ange a general partner.
	with this filing is voluntarily furnished and does not gual			

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 \$20, Florida Statutes

SIGNATURE

P. JODISGEN, MEMBER