

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

97 JAN 10 AM 8:31

mtm
1/16



1. Name of Limited Partnership

1a. DOCUMENT #
B94000000154

EAGLE RIDGE MALL LIMITED PARTNERSHIP

Mailing Address

**7120 NORTH LASALLE ST.
STE. #3300
CHICAGO IL 60602-2415
US**

Principal Office Address

**120 NORTH LASALLE ST.
STE. #3300
CHICAGO IL 60602-2415
US**

3. Date Formed or Registered

04/21/1994

5a. Capital Contributions as
Shown on record.

\$300,000.00

3a. Date of Last Report

12/26/1995

5b. Amount of Capital
Contributions in FLORIDA
to date:

\$300,000.00

4. State or Country of Formation

DE

2. Mailing Address

55 W. Monroe St.

2a. Principal Office Address

55 W. Monroe St.

Suite, Apt. #, etc.

Suite 3100

Suite, Apt. #, etc.

Suite 3100

City & State

Chicago, IL 60603

City & State

Chicago, IL 60603

Zip

Country

US

Zip

Country

US

6. FEI Number

42-1421211

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐

**\$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

789, 524, 621

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)

EAGLE RIDGE MALL, INC.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

**215-KEO-
55 W. Monroe St.
Suite 3100**

11b. City, State & Zip Code

**DES-MONIES-IA-50309-
Chicago, IL 60603**

11c. Registration/
Document Number

F94000002076

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

Bernard Freibaum

DATE **12/11/96**

Typed or Printed Name of General Partner Signing Form

Bernard Freibaum

Daytime Telephone Number

(312) 551-5205