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

96 DEC 24 PM 4:17

1. Name of Limited Partnership

EIC-JACKSONVILLE, L.P.-LTD.

1a. DOCUMENT #
B94000000340

Mailing Address
111 E. WAYNE ST., SUITE 500
FORT WAYNE IN 46802

Principal Office Address
111 E. WAYNE ST., SUITE 500
FORT WAYNE IN 46802

3. Date Formed or Registered
08/22/1994

3a. Date of Last Report
01/03/1996

4. State or Country of Formation
IN

5a. Capital Contributions as Shown on record
$1,000.00

5b. Amount of Capital Contributions IN FLORIDA to date
-0-

2. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

2a. Principal Office Address
Suite, Apt. #, etc.
City & State
Zip Country

6. FEI Number
35-1927025

☐ 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

SCHEU, WILLIAM E
200 WEST FORSYTH STREET, SUITE 1600
JACKSONVILLE FL 32202

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 section 620.1041 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
EQUITY INVESTMENT CORP. OF I	111 E. WAYNE ST., SUI	FORT WAYNE IN 46802	F93000003403

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 accurately, 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 the report as required by Chapter 620, Florida Statutes.

SIGNATURE [signature]

DATE 12/9/96

Typed or Printed Name of General Partner Signing Form George B. Huber

Daytime Telephone Number (219) 426-4704

CR2E003 (6/96)

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