1253 Hays Street
Tallahassee, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8086

L95000000098

CSC networks
PRENTICE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 563404 79823A

AUTHORIZATION : 700001434587
-03/21/95--01054--030
*****87.50 *****87.50

COST LIMIT : $ ~~200.00~~ Prepaid

ORDER DATE : March 21, 1995

ORDER TIME : 9:44 AM

ORDER NO. : 563404

CUSTOMER NO: 79823A

CUSTOMER: Thelma T. Conner, Legal Asst
Richards Gilkey Fite Slaughter
1253 Park Street

Clearwater, FL 34616

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 21 AM 11:35

RECEIVED
95 MAR 21 AM 10:14
DIVISION OF CORPORATION

FOREIGN FILINGS

NAME: EIC-SPRING HILL, LIMITED PARTNERSHIP

_____ PROFIT
_____ NON-PROFIT

___ CORPORATE
XX LIMITED PARTNERSHIP

XX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

BK 3/21/95

CONTACT PERSON: Debbie Skipper

Florida Department of State, Jim Smith, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. EIC-SPRING HILL, LIMITED PARTNERSHIP
(Name of limited partnership as it is in the home state)

2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida must contain the word "LIMITED" or "LTD.")

3. INDIANA (State of Formation) 4. FEBRUARY 8, 1995 (Date of Formation)

5. R. Carlton Ward
(Name of Registered Agent for Service of Process)

6. Richards, Gilkey, Fite, Slaughter, Pratesi & Ward, P.A.
1253 Park Street
(Street Address of Registered Office)

Clearwater (City), Florida 34616 (Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 21 AM 11:35

7. Acceptance by the Registered Agent for Service of Process.

R. Carlton
(Agent must sign on this line)

8. COMMERCE BUILDING, SUITE 1111
127 W. BERRY STREET FORT WAYNE INDIANA 46802
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS F93000003407 SPECIFIC ADDRESS

EQUITY INVESTMENT CORP., an Indiana Corporation qualified to transact business in Florida under the name Equity Investment Corp. of Indiana	COMMERCE BUILDING, SUITE 1111 127 WEST BERRY STREET FORT WAYNE, INDIANA 46802

10. COMMERCE BUILDING, SUITE 1111, 127 WEST BERRY STREET, FORT WAYNE, INDIANA 46802
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

12. COMMERCE BUILDING, SUITE 1111
127 WEST BERRY STREET, FORT WAYNE, INDIANA 46802
(Mailing Address of Limited Partnership)

13. THE SECRETARY OF STATE OF THE STATE OF FLORIDA IS HEREBY APPOINTED THE AGENT OF EIC- Spring Hill, LIMITED PARTNERSHIP, FOR SERVICE OF PROCESS IF THE ABOVE AGENT'S AUTHORITY IS REVOKED OR SAID AGENT CANNOT BE FOUND OR SERVED WITH THE EXERCISE OF REASONABLE DILIGENCE.

FILED
95 MAR 21 AM 11:35
SECRETARY OF STATE
DIVISION OF CORPORATIONS

This 22nd day of FEBRUARY, 19 95.

GEORGE B. HUBER, as president of Equity Investment Corp., an Indiana corporation qualified to transact business in Florida under the name Equity Investment Corp. of Indiana, general partner of EIC-Spring Hill, Limited Partnership

STATE OF INDIANA

COUNTY OF ALLEN

THE FOREGOING instrument was acknowledged and sworn to before me this 22nd day of FEBRUARY, 19 95, by GEORGE B. HUBER, AS PRESIDENT OF EQUITY INVESTMENT CORPORATION, GENERAL PARTNER (Name of General Partner) of EIC-SPRING HILL, LIMITED PARTNERSHIP (Name of Limited Partnership), an INDIANA Limited Partnership.

Tamara L. Monroe
Notary Public

State of Indiana at Large

(SEAL) My Commission Expires: April 28, 1998

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME the undersigned personally appeared GEORGE B. HUBER, AS PRESIDENT OF EQUITY INVESTMENT CORP., a general partner of SPRING HILL, LIMITED PARTNERSHIP a (an) INDIANA limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is $ 1,000.00 .
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is $ 1,000.00 .

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 21 AM 11:35

This 22nd day of FEBRUARY, 19 95 .

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

GEORGE B. HUBER, as president of Equity Investment Corp., an Indaina corporation qualified to transact business in Florida under the name Equity Investment Corp. of Indiana, general partner of EIC-Spring Hill, Limited Partnership

State of INDIANA

County of ALLEN

Date FEBRUARY 1995

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared GEORGE B. HUBER, AS PRESIDENT OF EQUITY INVESTMENT CORP., GENERAL PARTNER OF EIC SPRING HILL LIMITED PARTNERSHIP (General Partner), known to me and known to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

AS PRESIDENT OF

IN WITNESS WHEREOF I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 22nd day of FEBRUARY, 19 95 .

Notary Public

Seal

State of Indiana at Large

My commission expires: April 28, 1998

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO _ VOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996

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

FILED
95 DEC 20 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

ZIC-SPRING HILL, LIMITED PARTNERSHIP

1a. DOCUMENT # **B95000000098**

96-AR

CM

Mailing Address
~~COMMERCE BUILDING~~
~~127 WEST BERRY STREET, SUITE 1111~~
~~FORT WAYNE IN 46802~~

Principal Office Address
~~COMMERCE BUILDING~~
~~127 WEST BERRY STREET, SUITE 1111~~
~~FORT WAYNE IN 46802~~

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

2. New Mailing Address, if Applicable
Suite, Apt. #, etc: 111 E. Wayne St. Suite 500
City, State & Zip: Fort Wayne, IN 46802

2a. New Principal Office Address, if Applicable
Suite, Apt. #, etc: 111 E. Wayne St. Suite 500
City, State & Zip: Fort Wayne, IN 46802

3. Date Formed or Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation
03/21/1995		IN

5a. Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to date	6. FEI Number	7. CERTIFICATE OF STATUS REQUIRED
$1,000.00	-0-	35-1945141	Applied For ___ / Not Applicable ✓ — $8.75 Additional Fee required for a Certificate of Status

8. **FEES:** 1.) Filing Fee: Computed at a rate of $7 per $1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of $52.50 and a maximum of $437.50
2.) Supplemental Fee: $138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN $191.25 ($52.50 + $138.75) AND NO MORE THAN $576.25 ($437.50 + $138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
WARD, R. CARLTON C/O RICHARDS, GILKEY, FITE, ET AL 1253 PARK STREET CLEARWATER FL 34616	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. # etc City: 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

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.	127 WEST BERRY STREET	FORT WAYNE IN 46802	P93000003403

100001675341
-01/02/96--01049--019
****191.25 ****191.25

CR2E003 (6/95)

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 _____ DATE 12/14/95

Typed or Printed Name of General Partner Signing Form: George B. Huber — Telephone Number: (219) 426-4704

0013951