

**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID 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 MAR 10 PM 1:43



1. Name of Limited Partnership  
**RAMCO-GERSHENSON PROPERTIES LIMITED PARTNERSHIP**

1a. DOCUMENT #  
**B9600000125**

Mailing Address <b>27600 NORTHWESTERN HIGHWAY, SUITE 200 SOUTHFIELD MI 48034</b>	Principal Office Address <b>27600 NORTHWESTERN HIGHWAY, SUITE 200 SOUTHFIELD MI 48034</b>
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Formed or Registered <b>04/11/1996</b>	5a. Capital Contributions as Shown on record. <b>\$13,603,665.00</b>
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date: <b>\$13,603,665.00</b>
4. State or Country of Formation <b>DE</b>	6. FEI Number <b>38-3212115</b> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent  
**HOMISCO INCORPORATION, INC.  
222 LAKEVIEW AVENUE, SUITE 800  
WEST PALM BEACH FL 33401**

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 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) <b>RAMCO-GERSHENSON PROPERTIES</b>	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <b>27600 NORTHWESTERN HI</b>	11b. City, State & Zip Code <b>SOUTHFIELD MI 48034</b>	11c. Registration/Document Number <b>D96000000008</b>
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**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 report 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 or compliance with Section 119.07(3)(k) to the extent 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 **Denn Gershenson** DATE **2/28/97**  
Typed or Printed Name of General Partner Signing Form Daytime Telephone Number **(810) 350-9900**

CR2E003 (11/96)