## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

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DOCLIMENT #

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JAN 21 AM 11: 45

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Name of Limited Partnership	189600000	B9600000277			
BROOKDALE INVESTORS, I	L.P.			BEATH BOATH BOATH BOATH AT THE FLOOR HOUSE HEALT BOATH	
Malling Address	Principal Office Address		3, Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record.	
C/O THE BROOKDALE GROUP, L.L.C.		526 E. PARK AVENUE TALLAHASSEE FL 32301			
3343 PEACHTREE ROAD, N.E., STE. 510	-			<b>\$7,100,000.00</b>	
ATLANTA GA 30926				5b. Amount of Capital Contributions in FLORIDA	
2. Malling Address	2a. Principal Office Address	2a. Principal Office Address		# 1,100,000	
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. FEI Number 58-2127418	Applied For	
City & State	City & State	City & State		Not Applicable	
7in Country	7in.	Zip Country		\$8.75 Additional Fee Required	
Zip Country				8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Co	urrent Registered Agent		10. If changed, new Registe	red Agent/Office	
NATIONAL REGISTERED AGENTS, INC. 528 E. PARK AVENUE TALLAHASSEE FL 32301		Name Street Address (P.O. Box Number Is Not Acceptable)			
					Suite, Apt. #, etc
		City FL Zip Code			
		agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	gations of section 620.192, Florida Statutes.  nt)	LIMITED	nge was authorized by its general partner(s). I he
11. Name(s) of General Partner(s)	UST BE REGISTERED AN  Address of Each Gene		11b. City, State & Zip Code	11c. Registration/	
	11a. Address of Each Gene (Do NOT Use Post Office I		ATLANTA GA 30326	Document Number	
BROOKDALE PARTNERS, L.L.C.	3343 PEACHTREE ROAL	3343 PEACHTREE ROAD,		M9600000262	
			100002 -01/2: *****	4137514 3/9801002009 541.25 ****541.25	
	with this filing is voluntarily furnished and does in the event that the	not qualify for the information supp	<del></del>	la Statutes. I release the Division of ther certify that the information indicated on	
empowered to execute this report as restured to		$\sim$			
SIGNATURE ( ()	0.5.1		Daytime Telephone Number 4	will ziell anon	
Typed or Printed Name of General Partner Signing Ford	m L. Louidson, Ill		Daytime Telephone Number	04 202-040	