## 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

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

一位等,有量量に必要情况上多様の情報機構、安全を完成しなどのでは悪くの意識であるとなるとともありますので、新春電影を含むのましたが、ないないないないないないないないないないになっています。

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SECRETARY OF STATE TALLAHASSEE FLORIDA



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HÇ REALTY PARTNERSHIP,	L.P.			88111 18811 88111 <b>8</b> 8111 881118 71181 7118 7111 1881	
Mailing Address FOSTER PLAZA X 680 ANDERSEN DRIVE	Principal Office Address FOSTER PLAZA X 680 ANDERSEN DR	FOSTER PLAZA X		<b>5a.</b> Capital Contributions as Shown on record.  \$55,000,000.00	
PITTSBURGH PA 15220  2. Mailing Address				5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			98,162,984.00  Applied For	
City & State	City & State	City & State		Not Applicable	
Zip Country	Zip	Country	7. Certificate of Status Desired  8. Make check payable to: Dopt. o	\$8.75 Additional Fee Required  1 State (See reverse side for fee Information)	
9. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY  1201 HAYS STREET		Namo	10. If changed, new Registered Agent/Office		
		Streol Address (P.O. Box Number INDICENTION 2385281 — 6			
TALIAHASSEE FL 32301		Suite, Apt.		41.25 ****541.25	
4		City		FL Zip Code	
for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the second sec	o or registered agent, or both, in the State of F lions of section 620.192, Florida Statutes.  J	heed  LIMITED	PARTNERSHIP OR OTHE	reby accept the appointment of registered	
11. Name(s) of General Partnor(s)	11a. (Do NOT Use Post Office	and Danton	11b. City, State & Zip Code	11c. Registration/	
IHC REALTY CORPORATION	FOSTER PLAZA X, 680		PITTSBURGH PA 15220	F96000005047	
Note: General partners MAY N	OT be changed on this for	m; an am	endment must be filed to ch	ange a general partner.	
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance this annual report is true and accurate and that mean accurate and the empowered to execute this report as required by	with Section 119.07(3)(k) in the event that the y signature shall have the same legal effects a chapter 620, Florida Statutes.	information supp	plied is deemed exempt from public access. I furt	her certify that the information indicated on	
SIGNATURE Miller Kulandy			DATE .	DATE 12 15 197	
Typed or Printed Name of General Partner Signing Form	. J. William Riche	ardson	Daytime Telephone Number (4	12)437-0600	