, FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP

WILL BE SUBJECT TO R	EVOCATION AND \$500 PENALTY	Y FEE	_		
LIMPTO PART NEEDSHIP VIVA (BIPORT 997	FLORIDA DEPARTM	ENT OF STATE	DIVISION OF CO	ED OF STATE RPORATIONS PN 12: 50	
1. Name of Errited Partnership	1a. DOCUMENT #			ייובי טָּטָ	
CR/PL L.P., Ltd. 89600000470)	-		
			BKI	12/96	
Maling Address	Principal Office Address		3. Date Formed or Registered	(5a) Capital Contributions as Shown on record	
1235 Hartrey Evanston, Illinois 60202	1235 Hartrey Evanston, Illinois 60202		December 9, 199 3a. Date of Last Report N/A	5b. Amount of Capital	
			4. State or Country of Formation	Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		0	
Suite, Apt #, etc	Suite, Apt #, etc.			Applied For Not Applicable	
City & State		City & State		\$8.75 Additional	
Zip Country	Z _i p C	Country 8. Make check payable to Dept. of State (See reverse side for fee information)			
9. Name and Address of C	urrent Registered Agent		10. If changed, new Registers	rd Agent/Olfice	
Corporation Service Company		Name			
1201 Hays Street	2301	Street Address (P.O. I		Box Number Is Not Acceptable)	
rarranassee/ Profita S	2301	Suite, Apt. #, etc			
		City		FL Zip Code	
10a. Pursuant to the provisions of sections 620 to for the purpose of changing its registered of agent. Familiarnillar with, and accept the obli-	lice or registered agent, or both, in the State of Florida				
SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH	IAT IS A CORPORATION, LI	MITED PART	DATE		
	UST BE REGISTERED AND	ACTIVE WI			
11. Name(s) of General Partner(s)	11a. Address of Each General P	Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
RLB Management Co.	1235 Hartrey	Evan	ston, Illinois 60202	F96000006420	
	-	qualify for the exemption	n stated in Section 119.07(3)(k), Florida med exempt from public access. I furth	a Statutes. I release the Division of her certify that the information indicated on	

Typed or Printed Name of General Partner Signing Form Reed L. Beidler, President of Daytime Telephone Number (847) 570-3561
General Partner

SIGNATURE

Kavara



ACCOUNT NO. : 072100000032

REFERENCE : 202375

4351256

COST LIMIT

ORDER DATE: December 26, 1996

ORDER TIME: 3:02 PM

ORDER NO. : 202375-005

CUSTOMER NO: 4351256

CUSTOMER: Vasili D. Russis, Esq.

Levun Goodman & Cohen

Suite 650

500 Skokie Boulevard Northbrook, IL 60062

ANNUAL REPORT FILING

NAME: CR/PL L.P., LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Daniel W Leggett

EXAMINER'S INITIALS:

69600000470