

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC -8 PM 4:08

1. Name of Limited Partnership

1a. DOCUMENT #
B97000000574

CMD/Fund I GP Investments, L.P.

Mailing Address

Principal Office Address

227 W. Monroe Street, Suite 3900
Chicago, Illinois 60606

3. Date Formed or Registered

10/28/97

5a. Capital Contributions as Shown on record

0

3a. Date of Last Report

N/A

5b. Amount of Capital Contributions in FL ORIDA to date:

0

4. State or Country of Formation

Illinois

2. Mailing Address

2a. Principal Office Address

227 W. Monroe Street
Suite, Apt. #, etc.
Suite 3900

227 W. Monroe Street
Suite, Apt. #, etc.
Suite 3900

City & State
Chicago, Illinois

City & State
Chicago, Illinois

Zip Country
60606

Zip Country
60606

6. FEI Number

36-4184137

Applied For
 Not Applicable

7. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

Paul J. Kilgallon
c/o CMD Realty Investors, Inc.
899 West Cypress Creek Road, Suite 109
Ft. Lauderdale, Florida 33309-2046

10. If changed, new Registered Agent/Office

Name: 600002370846--R
-12/12/97--01074--025
Street Address (P.O. Box Number Is Not Acceptable): ****156.25 ****156.25
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)

CMD REIM, Inc.

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

227 W. Monroe Street
Suite 3900

11b. City, State & Zip Code

Chicago, Illinois 60606

11c. Registration/Document Number

B97000000574

Handwritten signature and date: 12-10

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

Handwritten signature of Randall J. Selig

DATE 11/06/97

Typed or Printed Name of General Partner Signing Form: CMD REIM, Inc. By: Randall J. Selig, Exec. V.P. Daytime Telephone Number (312) 726-3121

CR2E003 (6/97)