FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300000017

AEI FUND MANAGEMENT XVIII, INC.

Principal Place	of Business	Mailing Address							
1300 MINNESOT 30 EAST SEVEN	A WORLD TRADE CENTER TH STREET	1300 MINNESOTA WORLD TRADE CENTER 30 EAST SEVENTH STREET		DO NOT WRITE IN THIS SPACE					
ST. PAUL MN 55101		ST. PAUL MN 55101			3. Date Incorporated or Qualifed				
						01/04/1993			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For			
21		26	26			41-1620859 Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional			
22		27			<u> </u>	Fee Required.			
City & State	7	City & State				6. Election Campaign Financing \$5.00 May Be			
23		Zip Country				Trust Fund Contribution		led to Fees	
Zip	Country	——————————————————————————————————————	Zip Country			This corporation owes the current year Intage Personal Property Tax.	ngible ☐ Yes	XNo	
24	9. Name and Address of Curren		<u>50 </u>	_		10. Name and Address of New Registered A			
	- Name and Address of Curren	t Itagisterad Agont		81	Name		<u> </u>		
C T CORPORATION SYSTEM				00	82 Street Address (P.O. Box Number is Not Acceptable)		 _		
1200	SOUTH PINE ISLAND ROAD			82	Street Addre	SS (P.O. BOX Number is Not Acceptable)			
PLAN	ITATION FL 33324			83					
				84	City		85 2	Zip Code	
					•		1		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Signature, typed or printed name of registered ager			Agent	t signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	O DIRE	CTORS IN 12	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	Char		
TITLE	PCD JOHNSON, BOREDT B		1.2 NA		ļ				
NAME	JOHNSON, ROBERT P 30 E. 7TH STREET, #1300		8		ADDRESS				
STREET ADDRESS	ST. PAUL MN 55101		1.5 ST						
CITY-ST-ZIP TITLE	ST ST	☐ DELETE	2.1 ∏				☐ Char	nge 🗌 Addition	
NAME	LARSON, MARK E		2.2 NA	ME				,	
STREET ADDRESS	30 E. 7TH STREET, #1300				ADDRESS				
CITY-ST-ZIP	ST. PAUL MN 55101		2,4 C	ITY-S	T-ZIP				
TITLE		☐ DELETE	3.1 TI	TLE			Cha	nge 🗌 Addition 🛭	
NAME			3.2 NA	ME	1			Ì	
STREET ADDRESS	,		3.3 ST	REET	ADDRESS			ŀ	
CITY-S7-ZIP			3.4. C	∏Y-S	T-ZIP				
TITLE		☐ DELETE	4.1 Ti	ΠE	ĺ		☐ Char	nge	
NAME			4.2 N	AME				ł	
STREET ADDRESS			4.3 \$1	REET	ADDRESS			ļ	
CITY-ST-ZIP			4.4 CT		T-ZIP				
TITLE		☐ DELETE	5.1 TT				Chai	nge	
NAME ,			5.2 N/					ţ	
STREET ADDRESS					ADDRESS			ļ	
CITY-ST-ZIP			5.4 CI		T-ZIP				
TITLE		☐ DELETÉ	6.1 Ti				Cha	nge 🗖 Addition	
NAME	ar are areas		6.2 N	ME	}			Ï	

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY+ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90079 001 ***150.00