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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 F93000005528 (5) DOCUMENT #

SIMON DEBARTOLO GROUP, INC.

**FILED** Apr 29 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						BA BARBA BARAD ANADA ADAN ADDI	
•							
SUITE 15-E PO BOX 7066 115 WEST WASHINGTON STREET TAX DEPT.							
INDIANAPOLIS IN 46204		INDIANAPOLIS IN 46207			DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualified		
					12/06/1993		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 26		26	8		35-1901999	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees	
Zıp	Country	Zip	Country		8. This corporation owes or has paid the cu	rrent year Intangible	
24	25		10			Yes No	
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
C T CORPORATION SYSTEM			81	Name			
1200 SOUTH PINE ISLAND ROAD			82	Street Ad	idress (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324							
			83				
i			84	City		85 Zip Code	
					FL	.	
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.							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
	Signature, typed or printed name of registered agri			ini signature rec	guired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND		
FITLE	SIMON, MELVIN	☐ DELETE	1.1 TITLE			Change Addition	
NAME	115 WEST WASHINGTON ST	DEET CHITE 15 EACT	1.2 NAME				
STREET ADDRESS	INDIANAPOLIS IN 48204	HEET, SOITE 15 EAST	1.3 STREET				
CITY - ST - ZIP	CD CD	DELETE	1.4 CITY - S	T-ZIP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE	SIMON, HERBERT	□ DETE IE	2.1 TITLE	1		☐ Change ☐ Addition	
NAME	115 WEST WASHINGTON STI	DEET CLUTE 15 CACT	2.2 NAME				
STREET ADDRESS		MEET, SUITE 13 EAST	2.3 STREET	ADDRESS			
CITY-ST-ZIP	INDIANAPOLIS IN		2. 4 CITY -	ST-ZIP		[ ]	
TITLE	PD CHACM DAVID	☐ DELETE	3.1 TITLE			Change Addition	
NAME	SIMON, DAVID	OCCT OUTC 15 FACT	3.2 NAME				
STREET ADDRESS	115 WEST WASHINGTON STI	neei, ouiie io eadi	3.3 STREET			]	
CITY-ST-ZIP	INDIANAPOLIS IN 46204		3.4. CITY - S	ST-ZIP			
TITLE	VD	☐ DELETE	4.1 TITLE			Change Addition	
NAME	FOXWORTHY, RANDOLPH L	DECT CHITE 4E EACT	4. 2 NAME				
STREET ADDRESS	115 WEST WASHINGTON STI	neer, Suite 15 EAST	4.3 STREET				
CITY-ST-ZIP	INDIANAPOLIS IN 46204		4.4 CITY - S	T-ZIP			
TITLE	V CAVAMACIA OFFINIO	☐ DELETE	5.1 TITLE			L. Change L. Addition	
NAME	CAVANAGH, DENNIS	DEET CHITE 42 5407	5.2 NAME				
STREET ADDRESS	115 WEST WASHINGTON STI	MEET, SUITE 15 EAST	5.3 STREET	ADDRESS			
CITY-ST-ZIP	INDIANAPOLIS IN		5.4 CITY-S	T-ZIP			
TITLE	V	☐ DELETE	61 TITLE			☐ Change ☐ Addition	
NAME	NAPOLI, JAMES A	NREE ALINE J- 5-6-	6.2 NAME				
STREET ADDRESS	115 WEST WASHINGTON STI	reet, suite 15 east	63 STREET	ADDRESS			
CITY-ST-ZIP	INDIANAPOLIS IN 46204		6.4 CITY-S	T-ZIP			

I 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 supplemental 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 of 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 changer, or or on attachment with an address.

SIGNATURE:

4-20-98

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