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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300005798 (4)

**DEBARTOLO PROPERTIES MANAGEMENT, INC.** 

FILED Apr 29 1998 8:00am Secretary of State



							FI	
Principal Place of Business Mailing Address								
115 W WASHINGTON ST P O BOX 7066, TAX DEPI				T				
SUITE 15 EAST			INDIANAPOLIS IN 46207			BO MAY MANITE WELLIA AR LOS		
INDIANPOLIS IN 46204			US			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 12/21/1993		
2. Principal Place of Business 2a. Mailing			failing Address			4. FEI Number		
21	<u> </u>		26			34-1751820	Applied For	
***	Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable  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	23		28			Trust Fund Contribution	Added to Fees	
	Zip Country		Zip Country			8. This corporation owes or has paid the curren		
24	25	29		30		Personal Property Tax due June 30.	· `	
	9. Name and A	ddress of Current Register	red Agent	<u> </u>		10. Name and Address of New Registered Age	ent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 81						0		
110 N, MAGNOLIA ST.				-	92 Street Address /D.O. Boy Alumber in Met Assentable)			
TALLAHASSEE FL 32301			82 Street Add		Street	ddress (P.O. Box Number is Not Acceptable)		
			83					
				-			<del></del>	
				84	City	FL   <sup>6</sup>	35 Zip Code	
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 rain end trig stered agent and title if any licrable (NOT) Registered Agent signature required whon reinstating)  DATE								
12		OFFICERS AND DIRECT	ORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12	
TITL		•	☐ DELETE	1.4 TITLE			Change	
NAME SIMON, DAVID			1.2 NAME					
STREET ADDRESS 115 W WASHINGTON ST, STE		•	E 1.3 STREET		ADDRESS			
CITY	Y-ST-ZIP INDIANAPOLIS	3 IN		1.4 CITY - S	T - 71P			
TITL			DELETE	2.1 TITLE		SECRETARY	Change Addition	
NAM				2.2 NAME		JAMES M. BARKLEY	_	
STR	STREET ADDRESS 115 W WASHINGTON ST, STE		2.3 STREET ADD		ADDRESS	115 W. WASHINGTON ST, STA. ISE		
	<sub>r-st-zip</sub> <b>Indianapo</b> lis	<u> </u>		2. 4 CITY-S	T-ZIP	INDIANARULES, IN 46204		
TITL			DELETE	3.1 TITLE		TREASURE	Change Addition	
NAN	···			3.2 NAME		STEPHEN G. STERRETT	+	
STR		NGTON ST STE 15E		3.3 STREET	ADDRESS		\S \overline{\ov	
CITY	(-ST-ZIP INDIANAPOLIS	<u> </u>		3.4. CITY-S	T-ZIP	INDIANAPOLIS IN 4/204	:	
TITL	• • • • • • • • • • • • • • • • • • •		DELETE	41 TITLE			Change Addition	
NAN			·	4 2 NAME		RICHARD S. SOKOLOV		
STR		NGTON ST,STE 15E		4.3 STREET	AODRES\$	115 W. WASHINGTON ST, STE.	158	
CITY	(-ST-ZIP INDIANAPOLIS	i IN		4.4 CITY-SI	· ZIP	INDIANAPOLIS, IN 46204		
TITU	E		☐ DELETE	5.1 TITLE			Change	
NAM	Æ			5.2 NAME				
STR	EET ADDRESS			5.3 STREET	ADDRESS			
CITY	-ST-ZIP			5.4 CITY - ST	- ZIP			
TITL	E		☐ DELETE	6.1 TITLE			Change	
NAM	HE			6.2 NAME			1	
STR	EET ADDRESS			6.3 STREET	ADDRESS			
CITY	'-ST-ZIP			6.4 CITY - \$1	- ZIP			

14. Thereby 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 on the veceiver 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 changed, or or made accurate the same legal effect as if made under oath; that I am an officer or director of the corporation on the veceiver 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 changed, or or made accurate the same legal effect as if made under oath; that I am an officer or director of the corporation or the veceiver 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 changed, or or made accurate the same legal effect as if made under oath; that I am an officer or director of the corporation or the veceiver of the corporation of the corpora

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