

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

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P03815** (8)
1. Corporation Name
DEAN WITTER REALTY INCOME PROPERTIES I, INC.



Principal Place of Business % DEAN WITTER REYNOLDS INC. 101 CALIFORNIA ST. SAN FRANCISCO CA 94111	Mailing Address % DEAN WITTER REYNOLDS INC. 101 CALIFORNIA ST. SAN FRANCISCO CA 94111
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address c/o Morgan Stanley 26 Dean Witter & Co. 27 Suite, Apt. #, etc. 1221 Avenue of the Americas, 23rd Floor 28 City & State 29 New York, New York 29 Zip 10020 30 Country USA		3. Date Incorporated or Qualified 10/24/1984	
		4. FEI Number 13-3174556		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AVP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOUGLAS, RAYMOND F.	1.2 NAME	
STREET ADDRESS	429 WELLESLEY AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MILL VALLEY CA	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MAEGLIN, STEVEN R	2.2 NAME	S/D
STREET ADDRESS	333 CENTRAL PARK WEST, APT. 16A	2.3 STREET ADDRESS	Ronald T. Carman
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP	436 N. Village Avenue
TITLE	VP	3.1 TITLE	Rockville, Centre, NY 11570
NAME	AUSTIN, ROBERT B	3.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	17 MANITOU CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WESTFIELD NJ	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIPIETRO, RONALD J.	4.2 NAME	
STREET ADDRESS	29 - 91ST ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY	4.4 CITY-ST-ZIP	
TITLE	CD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, WILLIAM B.	5.2 NAME	
STREET ADDRESS	423 HILLSIDE AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	WESTFIELD NJ	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARDMAN, E D	6.2 NAME	P/D
STREET ADDRESS	3 LODER ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	RYE NY	6.4 CITY-ST-ZIP	

14. 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 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 changed, on an attachment with an address.

SIGNATURE _____

CR2E034 (10/97)