

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P07265 (2)
1. Corporation Name
HOWARD RETAIL INVESTMENT CORPORATION

Principal Place of Business Mailing Address
% THE ROUSE COMPANY C/O THE ROUSE COMPANY
10275 LITTLE PATUXENT PARKWAY 10275 LITTLE PATUXENT PARKWAY
COLUMBIA MD 21044 COLUMBIA MD 21044
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		08/29/1985	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		52-1464396	
24 Country		29 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<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 type="checkbox"/> No	

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

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		11 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DEERING, ANTHONY W.			12 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT			13 STREET ADDRESS			
CITY-ST-ZIP	COLUMBIA MD			14 CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> DELETE		21 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	RIVER, GARY M.			22 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT			23 STREET ADDRESS			
CITY-ST-ZIP	COLUMBIA MD			24 CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> DELETE		31 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MCGREGOR, DOUGLAS A			32 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT PKWY			33 STREET ADDRESS			
CITY-ST-ZIP	COLUMBIA MD			34 CITY-ST-ZIP			
TITLE	VT	<input type="checkbox"/> DELETE		41 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DONAHUE, JEFFREY H.			42 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT			43 STREET ADDRESS			
CITY-ST-ZIP	COLUMBIA MD			44 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		51 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ROTHSCHILD, BRUCE I			52 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT			53 STREET ADDRESS			
CITY-ST-ZIP	COLUMBIA MD			54 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		61 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SZYMANSKI, JOHN J.			62 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT			63 STREET ADDRESS			
CITY-ST-ZIP	COLUMBIA MD			64 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, or on an attachment with an address.

SIGNATURE: JOHN J. SZYMANSKI, VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 4/29/98
Daytime Phone #: 410-992-6468
0006814

CR2E034 (10/97)