


FILED

Feb 12 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 # P10006 1. Corporation Name CEDAR INCOME FUND, LTD., INC.		(5)	
Principal Place of Business 4333 EDGEWOOD ROAD N.E. CEDAR RAPIDS IA 52402-6601		Mailing Address 4333 EDGEWOOD ROAD N.E. CEDAR RAPIDS IA 52402-6601	
2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip Country 29 30	
9. Name and Address of Current Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324			81 Name 82 Street Address 83 84 City
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida. Such change was authorized by the corporation or agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ (NOTE: Registered Agent signature required)			
12. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BLANKENSHIP, DAVID L. 4333 EDGEWOOD RD. N.E. CEDAR RAPIDS IA	<input type="checkbox"/> DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS DEWALD, MAUREEN 4333 EDGEWOOD RD. N.E. CEDAR RAPIDS IA	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAST FLETCHER, ALAN F 4333 EDGEWOOD ROAD, N.E. CEDAR RAPIDS IA	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC FALCONIO, PATRICK E. 4333 EDGEWOOD RD. N.E. CEDAR RAPIDS IA	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MEYER, ALEX A 4333 EDGEWOOD ROAD NE CEDAR RAPIDS IA	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D INGRAHAM, EDWIN L 4333 EDGEWOOD ROAD NE CEDAR RAPIDS IA	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

[REDACTED]

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/06/1986			
4. FEI Number 42-1241468	<table border="1"> <tr> <td>Applied For</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>	Applied For	Not Applicable
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 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

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 requester, agent and firm if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANKENSHIP, DAVID L.	1.2 NAME	
STREET ADDRESS	4333 EDGEWOOD RD. N.E.	1.3 STREET ADDRESS	
CITY - ST - ZIP	CEDAR RAPIDS IA	1.4 CITY - ST - ZIP	
TITLE	VS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEWALD, MAUREEN	2.2 NAME	
STREET ADDRESS	4333 EDGEWOOD RD. N.E.	2.3 STREET ADDRESS	
CITY - ST - ZIP	CEDAR RAPIDS IA	2.4 CITY - ST - ZIP	
TITLE	VAST	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLETCHER, ALAN F	3.2 NAME	
STREET ADDRESS	4333 EDGEWOOD ROAD, N.E.	3.3 STREET ADDRESS	
CITY - ST - ZIP	CEDAR RAPIDS IA	3.4 CITY - ST - ZIP	
TITLE	DC	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FALCONIO, PATRICK E.	4.2 NAME	
STREET ADDRESS	4333 EDGEWOOD RD. N.E.	4.3 STREET ADDRESS	
CITY - ST - ZIP	CEDAR RAPIDS IA	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEYER, ALEX A	5.2 NAME	
STREET ADDRESS	4333 EDGEWOOD ROAD NE	5.3 STREET ADDRESS	
CITY - ST - ZIP	CEDAR RAPIDS IA	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	INGRAHAM, EDWIN L	6.2 NAME	
STREET ADDRESS	4333 EDGEWOOD ROAD NE	6.3 STREET ADDRESS	
CITY - ST - ZIP	CEDAR RAPIDS IA	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, or on an attachment with an address.

SIGNATURE: Maryam A. H. H.

Vice President and
Secretary

1/21/98 (319) 398-8645

CP2E034 (10/97)

CO_ODCO
Printed: 01/21/88

**Company Officer/Director List
As of January 21, 1998**

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61 08 - CEDAR INCOME FUND, LTD.

4333 Edgewood Road N.E.
Cedar Rapids, IA 52499

Date of Incorporation: March 24, 1989
State of Incorporation: Iowa
Federal Tax Id: 42-1241468
Shares Authorized: 5,020,000 shares common stock Par Value: \$ 1.00
Shares Issued:
Shares Authorized: Par Value:
Shares Issued:
Parent Company:
Annual Meeting Day: First Thursday in May
Required Directors: 3-7
Principal Business: Real estate inv trst
NAIC Group Code:
NAIC Company Code:
Last Exam Date:
Best Rating:

DIRECTORS

PATRICK E. FALCONIO
EDWIN L. INGRAHAM
James Roberts

ALEX A. MEYER

OFFICERS

DAVID L. BLANKENSHIP	PRESIDENT
PATRICK E. FALCONIO	CHAIRMAN OF THE BOARD
MAUREEN DEWALD	SECRETARY
	VICE PRESIDENT
ALAN F. FLETCHER	TREASURER
	VICE PRESIDENT
	ASSISTANT SECRETARY
ROGER SCHULZ	CONTROLLER
	ASSISTANT SECRETARY
JEFF DIXON	ASSISTANT SECRETARY