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This Agreement made and entered into this 15 day of May, 1983, by and between 6111 Building Partnership, Merrillville, Lake County, Indiana, hereinafter called Lessor, and the Ross Clinic, Inc., an Indiana Corporation, hereinafter called Lessee.

WHEREAS, the parties hereto are presently the respective Lessor and Lessee of a Lease entered into on November 18, 1963, by and between their respective predecessor organizations, the Gary Medic-Land Corporation, and the Gary Clinic, which Lease was recorded December 2, 1963 as Document No. 528874, in Book 883, Page 246, in the Office of the Recorder of Lake County, Indiana, for premises located in Merrillville, Indiana, to-wit:

The West 726 feet of the North 733.33 feet of the Northwest 1/4 of the Northeast 1/4 of Section 9, Township 35 North, Range 8 West of the Second Principal Meridian, in Lake County, Indiana. Commonly known as Ross Clinic, 6111 Harrison Street, Merrillville, Indiana; and

WHEREAS, said Lease provided for a 25 year term to expire in December, 1988, and

WHEREAS, it is the mutual desire of the parties to terminate said Lease effective September 30, 1983, subject to the rights of Stephen K. Grandfield, D.P.M., Inc., an Indiana Corporation to a portion of the premises as described in a Lease dated September 1, 1982 which commenced November 1, 1982, for a 5 year period ending November 31, 1987, which Lease the Lessor agrees to accept and honor; and

WHEREAS, Lessor and Lessee agree to perform all obligations required of each of them under the terms of their Lease through the date of September 30, 1983, including Lessee's obligation to pay real estate taxes, insurance and the maintenance of the premises.

CHICAGO TITLE INSURANCE COMPANY
INDIANA DIVISION

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
JAN 19 1 46 PM '84
WILLIAM B. SKIOW
RECORDER

at 8.00

P.J. Amico, Secretary of the Ross Clinic, Inc., and acknowledge the execution of the foregoing Termination of Lease Agreement on behalf of the Lessor and Lessee; and, who having been duly sworn, state that the representations contained therein are true.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal.

Mark S. Lucas
Notary Public



My Commission Expires: 2-22-85

This instrument prepared by: Robert A. Lucas, Attorney at Law,
1000 East 80th Place, 606 South Tower, Merrillville, Indiana 46410.