~2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97000002555

1. Entity Name

SSR REALTY ADVISORS, INC.



Principal Place of Business

10 PARK AVE,

MORRISTOWN, NJ 07960

Mailing Address

ONE CALIFORNIA STREET

1400

DO NOT WRITE IN THIS SPACE

SAN FRANCISCO, CA 94111-5415 US

FILED

04 FEB -6 AN 10: 50

TALLAHASSEE, FLORIDA



01082004

No Chg-P

CR2E034 (10/03)

4. FEI Number 94-3262034

Herman H. Howerton Secretary

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Bequired

1/15/04

Daytime Phone #

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. t am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE					
FILE NOWII! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	I		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Chairmer, of the Boar DAVIS, RICHARDS ONE FINANCIAL CENTER 31ST FLO BOSTON, MA 02111		500029948095 03/05/0401028031 **158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO FINELLI, WILLIAM A 10 PARK AVE, MORRISTOWN, NJ 07960				3/04 010E0 031 ***130,13
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIEBLICH, FREDERICH 10 PARK AVE, MORRISTOWN, NJ 07960			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOWERTON, HERMAN H ONE CALIFORNIA STREET #1400 SAN FRANCISCO, CA 94111			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAURER, MARY ANN 10 PARK AVE, MORRISTOWN, NJ 07960				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CINQUE, MICHAEL 10 PARK AVE, MORRISTOWN, NJ 07960				
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					