


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2008 08:00 AM**  
**Secretary of State**

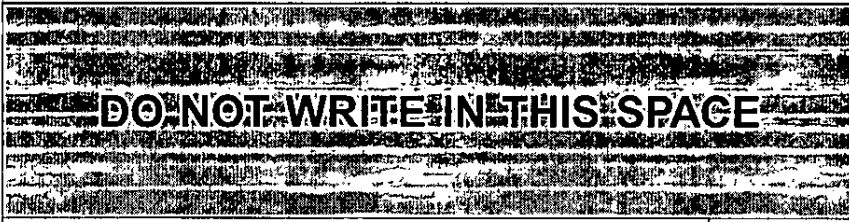
DOCUMENT # F97000006156  
 1. Entity Name  
 TATE TERRACE REALTY INVESTORS, INC.



Principal Place of Business      Mailing Address  
 448 VIKING DR., #220      448 VIKING DR., #220  
 VIRGINIA BEACH, VA 23452      VIRGINIA BEACH, VA 23452



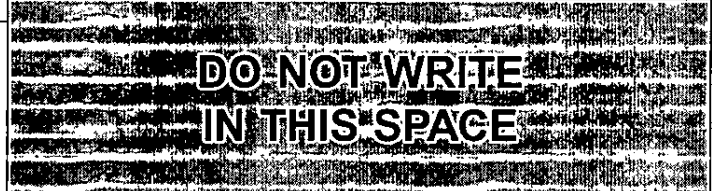
04302008      No Chg-P      CR2E034 (11/05)



4. FEI Number  
 54-1540695      Applied For  
 Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525



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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

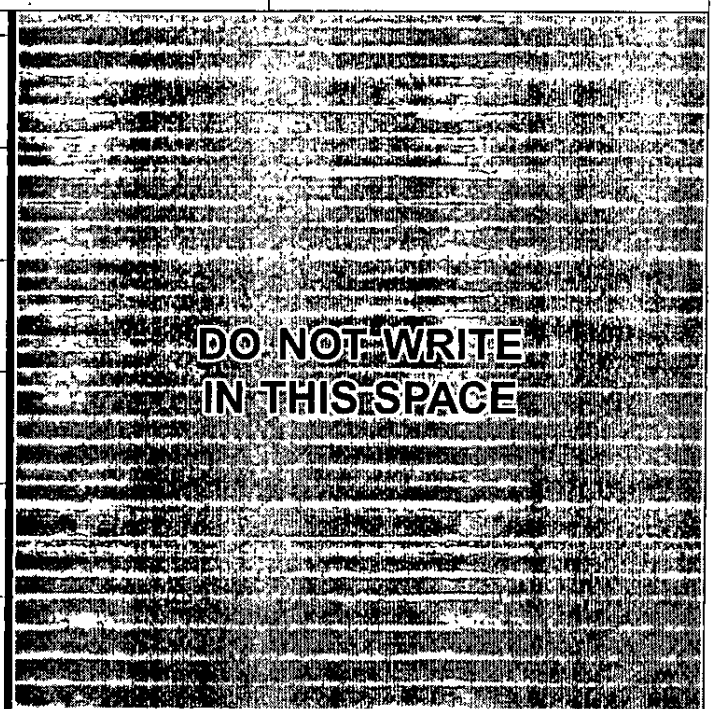
**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

U00000939350  
 05/28/08-80024-025 150.00

10. OFFICERS AND DIRECTORS

|                |                          |
|----------------|--------------------------|
| TITLE          | PD                       |
| NAME           | SANDLER, STEVEN B        |
| STREET ADDRESS | 221 76TH ST.             |
| CITY-ST-ZIP    | VIRGINIA BEACH, VA 23451 |
| TITLE          | V                        |
| NAME           | BENSON, NATHAN D         |
| STREET ADDRESS | 448 VIKING DR., #220     |
| CITY-ST-ZIP    | VIRGINIA BEACH, VA 23452 |
| TITLE          | SD                       |
| NAME           | SANDLER, ARTHUR B        |
| STREET ADDRESS | 536 REDGATE AVE.         |
| CITY-ST-ZIP    | NORFOLK, VA 23507        |
| TITLE          |                          |
| NAME           |                          |
| STREET ADDRESS |                          |
| CITY-ST-ZIP    |                          |
| TITLE          |                          |
| NAME           |                          |
| STREET ADDRESS |                          |
| CITY-ST-ZIP    |                          |



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: [Signature]      4/30/08      7574635700  
 \_\_\_\_\_      Date      Daytime Phone #