## 2001 UNIFORM BUSINESS REPORT (UBR) May 03, 2001 8:00 am Secretary of State DOCUMENT # F9900000851 1. Entity Name TARRAGON REALTY INVESTORS, INC. 05-03-2001 90076 037 \*\*\*150.00 Principal Place of Business Mailing Address 280 PARK AVE., EAST BLDG., 20TH FLOOR 280 PARK AVE., EAST BLDG., 20TH FLOOR NEW YORK NY 10017 NEW YORK NY 10017 3. Mailing Address 3100 Monticello DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 13-3940880 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State

11.	OFFICERS AND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	PD	☐ Delete	TITLE			Change	☐ Addition	
NAME	FRIEDMAN, WILLIAM S		NAME		and r			
STREET ADDRESS	280 PARK AVE., EAST BLDG., 20TH FLOOR	₹	STREET ADDRESS	1775 Broadway 1	23 Ploor		•	
CITY-ST-ZIP	NEW YORK NY 10017		CITY-ST-ZIP	New York NY	10019			
TITLE	V	☐ Delete	TITLE	EVP		Change	Addition	
NAME	RUBENSTEIN, CHARLES D		NAME		a a ad			
STREET ADDRESS	280 PARK AVE., EAST BLDG., 20TH FLOOP	}	STREET ADDRESS	1775 Broadway:				
CITY-ST-ZIP	NEW YORK NY 10017		CITY-ST-ZIP	New York NV	10019			
TITLE	S	☐ Delete	TITLE	SEVP		2 Change	☐ Addition	
NAME	MANSFIELD, KATHRYN		NAME					
STREET ADDRESS	3100 MONTICELLO, SUITE 200		STREET ADDRESS				}	
CITY-ST-ZIP	DALLAS_TX_75205		CITY-ST-ZIP				ļ	
TITLE	T	☐ Delete	TITLE	SVP T	<u></u>	Change	Addition	
NAME	MINOR, TODD C		NAME				Ì	
STREET ADDRESS	3100 MONTICELLO, SUITE 200		STREET ADDRESS					
CITY-ST-ZIP	DALLAS TX 75205		CITY-ST-ZIP					
TITLE		Delete	TITLE	C00	<del></del> [	Change	Addition	
NAME			NAME	Robert Rothenb	erg			
STREET ADDRESS			STREET ADDRESS	1775 Broadway	, 23rd Floo	7		
CITY-ST-ZIP			CITY-ST-ZIP	New York NI	1 10019			
TITLE		☐ Delete	TITLE	EVP CFO	[	Change	Addition	
NAME			NAME	Erin Davis				
STREET ADDRESS			STREET ADDRESS	Frin Davis 3100 Monficello	Suite 200	>		
CITY-ST-ZIP			CITY-ST-ZIP	Dallas TV 7	5205			

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CATHRYN MANSFIELD 4.9.01

214.599.220

Daytime Phone #

CR2E034 (10/0