


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
Mar 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 822910 (6) 1. Corporation Name TRANSTATES PROPERTIES INCORPORATED					
Principal Place of Business 1600 VALLEY ROAD WAYNE NJ 07470			Mailing Address 1600 VALLEY ROAD WAYNE NJ 07470-2043		
2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/08/1969 3a. Date of Last Report 07/08/1996 4. FFL Number 22-1898474 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CORRIGAN, JOHN F. 924 BARNETT BANK BLDG. JACKSONVILLE FL 32213			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
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 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. I do 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.					

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	LATTIMORE, JR. W.	1.2 NAME	
STREET ADDRESS	1 SKIDAWAY VILLAGE WALD	1.3 STREET ADDRESS	
CITY- ST- ZIP	SAVANNAH GA	1.4 CITY- ST- ZIP	
TITLE	VP	2.1 TITLE	
NAME	SOUTENDIJK, D.R.	2.2 NAME	
STREET ADDRESS	1600 VALLEY ROAD	2.3 STREET ADDRESS	
CITY- ST- ZIP	WAYNE NJ	2.4 CITY- ST- ZIP	
TITLE	T	3.1 TITLE	
NAME	BARNEY, DONALD W.	3.2 NAME	
CITY- ST- ZIP	WAYNE NJ	3.3 STREET ADDRESS	
TITLE	S	3.4 CITY- ST- ZIP	
NAME	ELLIOTT, MARY BETH	4.1 TITLE	
STREET ADDRESS	1600 VALLEY ROAD	4.2 NAME	
CITY- ST- ZIP	WAYNE NJ	4.3 STREET ADDRESS	
TITLE	AT	4.4 CITY- ST- ZIP	
NAME	HODGE, DENNIS S.	5.1 TITLE	
STREET ADDRESS	1 LANDINGS WAY	5.2 NAME	
CITY- ST- ZIP	SAVANNAH GA	5.3 STREET ADDRESS	
TITLE	AS	5.4 CITY- ST- ZIP	
NAME	KOBLEUR, JAMES R.	6.1 TITLE	
STREET ADDRESS	W LATHROP AVENUE	6.2 NAME	
CITY- ST- ZIP	SAVANNAH GA	6.3 STREET ADDRESS	
		6.4 CITY- ST- ZIP	

CR2E034 (9/96)

SIGNATURE:

  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD W. BARNEY TREASURER

(201) 628-2000

Date

Daytime Phone # Address