

2000 UNIFORM BUSINESS REPORT (UBR)

6/

FILED
Jul 21, 2000 8:00 am
Secretary of State

06-20-2000 90009 044 ***150.00

DOCUMENT # 822910

1. Entity Name
TRANSTATES PROPERTIES INC.



Principal Place of Business: 1600 Valley Road, Wayne, NJ 07470
 Mailing Address: 1600 Valley Road, Wayne, NJ 07470

2. Principal Place of Business: 2 Manhattanville Road, Suite, Apt. #, etc.
 3. Mailing Address: 6400 Poplar Avenue, Suite, Apt. #, etc., 10th Floor

City & State: Purchase, NY
 City & State: Memphis, TN
 Zip: 10577, Country: USA
 Zip: 38197, Country: USA

4. FEI Number: 22-1898474
 Applied For: Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Corrigan, John F
 924 Barnett Bank Building
 Jacksonville, FL 32213

7. Name and Address of New Registered Agent
 Name: CT Corporation
 Street Address (P.O. Box Number is Not Acceptable): 1200 Pine Island Road
 City: Plantation, FL, Zip Code: 33324

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: *[Handwritten Signature]* DATE: June 12, 2000
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$250.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE: PD	NAME: Lattimore, Jr. W.	STREET ADDRESS: 1 Skidaway Village Wald	CITY-ST-ZIP: Savannah, GA	<input checked="" type="checkbox"/> Delete
TITLE: VP	NAME: Soutendijk, D.R.	STREET ADDRESS: 1600 Valley Road	CITY-ST-ZIP: Wayne, NJ	<input checked="" type="checkbox"/> Delete
TITLE: T	NAME: Carroll, James L.	STREET ADDRESS: 1 Landings, Way	CITY-ST-ZIP: Savannah, GA	<input checked="" type="checkbox"/> Delete
TITLE: S	NAME: Mary Beth Elliott	STREET ADDRESS: 1600 Valley Road	CITY-ST-ZIP: Wayne, NJ	<input checked="" type="checkbox"/> Delete
TITLE: AT	NAME: Hodge, Dennis S.	STREET ADDRESS: 1 Landings, Way	CITY-ST-ZIP: Savannah, GA	<input checked="" type="checkbox"/> Delete
TITLE: AS	NAME: Kobleur, James R.	STREET ADDRESS: W Lathrop Avenue	CITY-ST-ZIP: Savannah, GA	<input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PD	NAME: O'Brien, George A.	STREET ADDRESS: 6600 LBJ Freeway	CITY-ST-ZIP: Dallas, TX 75240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP/T	NAME: Kliman, Thomas	STREET ADDRESS: 6400 Poplar Avenue	CITY-ST-ZIP: Memphis, TN 38197	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP/S	NAME: Guedry, James	STREET ADDRESS: 2 Manhattanville Road	CITY-ST-ZIP: Purchase, NY 10577	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: AT/AS	NAME: Finnegan, John	STREET ADDRESS: 6400 Poplar Avenue	CITY-ST-ZIP: Memphis, TN 38197	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Handwritten Signature]* DATE: 6-2-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)

DOC# 822910

Transtates Properties Inc. 308669
6400 Poplar Avenue
Memphis, TN 38197

June 1, 2000

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

This letter is to inform you that a request was made for the preprinted form for the Florida Uniform Business Report before May 1, 2000. However, the forms were not received until May 30, 2000 and we therefore request that the \$400 penalty be waived.

Sincerely,



Neel Gupta
Tax Department
Transtates Properties Inc.