

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 850431

1. Entity Name

THIRD INCOME PROPERTIES, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90196 001 ***150.00

656900



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
% TAX DEPT. 9TH FLOOR 1000 HARBOR BLVD. WEEHAWKEN NJ 07087	% TAX DEPT. 9TH FLOOR 1000 HARBOR BLVD. WEEHAWKEN NJ 07087

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	13-3035818	Applied For
		Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VP	TITLE	
NAME	BOLANA, THOMAS	NAME	
STREET ADDRESS	1000 HARBOR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ 07087	CITY-ST-ZIP	
TITLE	S	TITLE	
NAME	HAUGHEY, DOROTHY F.	NAME	
STREET ADDRESS	1000 HARBOR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	VP	TITLE	
NAME	MEDLOCK, TIMOTHY J	NAME	
STREET ADDRESS	1000 HARBOR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	P	TITLE	
NAME	RUBIN, BRUCE	NAME	
STREET ADDRESS	1000 HARBOR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	FANCHER, TERRAENCE E	NAME	
STREET ADDRESS	1000 HARBOR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ 07087	CITY-ST-ZIP	
TITLE	AT	TITLE	
NAME	LEVINE, KENNETHS	NAME	
STREET ADDRESS	1000 HARBOR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ 07087	CITY-ST-ZIP	

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: Kenneth Levine 4/01 201-352-0559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

UBS PAINWEBBER INC.

DOC# 850431

656900

* 1000 Harbor Boulevard * Tax Department 9th Floor * Weehawken, NJ 07087 *

CERTIFIED MAIL #: _____

04/23/01

DEPT OF STATE
DIV OF CORPS/ANN. RPT FILINGS
P.O. BOX 1500
TALLAHASSEE , FL 32302-1500

Re: Third Income Properties Incorporated
Fein: 13-3035818

Gentlemen:

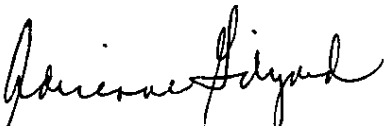
On behalf of the above captioned company, we are enclosing the following return:

ANNUAL REPORT

Enclosed also is a check in the amount of \$ 150.00 in payment of the indicated liability.

Should you have any questions regarding this filing please feel free to contact State Tax Manager, Louis DeVico at (201) 352-0559.

Very truly yours,


Adrienne Gilyard