

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2004 8:00 am
Secretary of State

07-22-2004 90001 023 ***550.00

DOCUMENT # F00000001878
 1. Entity Name
 KAUFMAN PROPERTIES, INC.



Principal Place of Business Mailing Address
 3098 PIEDMONT ROAD NE 3098 PIEDMONT ROAD NE
 490 490
 ATLANTA, GA 30305 ATLANTA, GA 30305

34064228



DO NOT WRITE IN THIS SPACE

07142004 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2504431	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~CORPORATION SERVICE COMPANY~~
~~1201 HAYS STREET~~
~~TALLAHASSEE, FL 32301-2525~~
SMITH HULSEY + BUSEY
225 WATER STREET, SUITE 1800
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

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 \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KAUFMAN, CRAIG S 3098 PIEDMONT ROAD NE STE 490 ATLANTA, GA 30305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS FELDMAN, TERRY 3098 PIEDMONT ROAD NE STE 490 ATLANTA, GA 30305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS BLOCK, MARK A 1545 PEACHTREE ST NE STE 700 ATLANTA, GA 30309
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-15-04

Date

704-601-8745

Daytime Phone #