

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 28, 2008 08:01**  
**Secretary of State**

**DOCUMENT # F02000004410**

1. Entity Name  
**SACHSENFONDS TAMPA REALTY, INC.**



Principal Place of Business  
**C/O INVESO RE GERMANY LE  
1166 SIXTH AVENUE  
NEW YORK, NY 10036**

Mailing Address  
**C/O INVESO RE GERMANY LE  
1166 SIXTH AVENUE  
NEW YORK, NY 10036**



03252008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**41-2056036**

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**

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

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	CT SCHMIDT, KLAUS D 85540 HEAR MUENCHEN GERMANY,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PELZ, SUSANNE 85540 HAAR MUENCHEN, GERMANY,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VON SYDOW, FERDINAND 1166 AVE OF THE AMERICAS NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CUMMINGS, J. GREER JR. 1800 DIVISION STREET NASHVILLE, TN 37203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KIRBY, MICHAEL 13155 NOEL ROAD, STE 500 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAGSDALE, RONALD 13155 NOEL ROAD, STE 500 DALLAS, TX 75240

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04/10/08-80055-015 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** \_\_\_\_\_

**Lee Phlegley**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/26/08**

Date

**(972) 715-7400**

Daytime Phone #