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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 18 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000000397

1. Corporation Name

**East Apartment Management, Inc.**

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **January 26, 1994**

3a. Date of Last Report: **N/A - Initial Report**

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 **2859 Paces Ferry Road** | 26 **2859 Paces Ferry Road** |
| Suite, Apt. #, etc<br>22 **Suite 1450** | Suite, Apt. #, etc<br>27 **Suite 1450** |
| City & State<br>23 **Atlanta, GA** | City & State<br>28 **Atlanta, GA** |
| Zip / Country<br>24 **30339** 25 **USA** | Zip / Country<br>29 **30339** 30 **USA** |

4. FEI Number: **58-2086614** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has/will be subject to tax under § 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CT Corporation System**
**1200 South Pine Island Road**
**Plantation, FL 33324**

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 (Signature of President, Vice President, Registered Agent and/or Corporation) (If CT Registered Agent signature required above) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | **President and Director**<br>**Marcus E. Bromley**<br>**2859 Paces Ferry Rd., Suite 1450**<br>**Atlanta, GA 30339** | 11 TITLE<br>12 NAME<br>13 STREET ADDRESS<br>14 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | **Vice President and Director**<br>**William M. Hammond**<br>**2859 Paces Ferry Rd., Suite 1450**<br>**Atlanta, GA 30339** | 21 TITLE<br>22 NAME<br>23 STREET ADDRESS<br>24 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | **Vice President and Director**<br>**C. Jordan Clark**<br>**2859 Paces Ferry Rd., Suite 1450**<br>**Atlanta, GA 30339** | 31 TITLE<br>32 NAME<br>33 STREET ADDRESS<br>34 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | **Treasurer and Secretary**<br>**Marvin R. Banks, Jr.**<br>**2859 Paces Ferry Rd., Suite 1450**<br>**Atlanta, GA 30339** | 41 TITLE<br>42 NAME<br>43 STREET ADDRESS<br>44 CITY-ST-ZIP | ☐ Change ☐ Addition<br>T.S. 4/18/95 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | 51 TITLE<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | 61 TITLE<br>62 NAME<br>63 STREET ADDRESS<br>64 CITY-ST-ZIP | ☐ Change ☐ Addition |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 added on an attachment with an address.

**SIGNATURE:** *Marvin R. Banks, Jr.* **Marvin R. Banks, Jr.** **4/5/95** **404-436-4600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #