2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001412

Entity Name: JEFFRIES TRAVIS REALTY CORP.

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 101 E. KENNEDY BLVD. SUITE 300 TAMPA, FL 33602 **Current Mailing Address: New Mailing Address:** 201 N. FRANKLIN STREET **SUITE 2000** TAMPA, FL 33602 FEI Number: 76-0103309 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MACFARLANE, ELLEN M ESQ. 201 N. FRANKLIN STREET **SUITE 2000** TAMPA, FL 33602 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PALMER, STEPHEN JR. Name: Name: 745 BOYLSTON STREET SUITE 401 Address: Address: BOSTON, MA 02116 City-St-Zip: City-St-Zip: DP Title: Title: () Delete () Change () Addition Name: AVLON, JOHN J Name: 200 MEETING STREET SUITE 405 Address: Address: CHARLESTON, SC 29401 City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition SMITH, KENNETH F Name: Name: 200 MEETING STREET, SUITE 405 Address: Address: City-St-Zip: CHARLESTON, SC 29401 City-St-Zip: () Delete Title: Title: () Change () Addition ANTAL, MICHAEL Name: Name: Address: 305 OLD COURSE DRIVE Address: City-St-Zip: FRIENDSWOOD, TX 775465636 City-St-Zip: Title: Title: () Delete () Change () Addition LAROCCA, JOHN N Name: Name: 101 E KENNEDY BLVD., SUITE 3000 Address: Address: City-St-Zip: TAMPA, FL 33602 US City-St-Zip: Title: () Delete Title: () Change () Addition MARTIN, SUSAN T Name: Name: 101 E. KENNEDY BLVD., SUITE 3000 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33602

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN J. AVLON P 04/21/2008