2008 FOR PROFIT CORPORATION ANNUAL REPORT

May 01, 2008 08:00 AN Secretary of State DOCUMENT # F97000006156 TATE TERRACE REALTY INVESTORS, INC. Principal Place of Business Mailing Address 448 VIKING DR., #220 448 VIKING DR., #220 VIRGINIA BEACH, VA 23452 VIRGINIA BEACH, VA 23452 04302008 No Cha-P CR2E034 (11/05) 4. FEI Number Applied For 54-1540695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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) U000009<u>3935</u>0 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 05/28/08-80024-025 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TOLE SANDLER, STEVEN B NAME STREET ADDRESS 221 76TH ST. CITY-ST-7IP VIRGINIA BEACH, VA 23451 BENSON, NATHAN D NAME 448 VIKING DR., #220 STREET ADDRESS VIRGINIA BEACH, VA 23452 CITY-ST-ZIP DO NOT WRITE SANDLER, ARTHUR B NAME STREET ADDRESS 536 REDGATE AVE. NORFOLK, VA 23507 CITY-SJ-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME

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 instee 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 will an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED