2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# F98000001112

Entity Name: PARKWAY PROPERTIES GENERAL PARTNERS, INC.

Current Principal Place of Business:

188 EAST CAPITOL STREET
STE 1000
JACKSON, MS 39201

New Principal Place of Business:

Current Mailing Address:

188 EAST CAPITOL STREET
STE 1000
JACKSON, MS 39201

New Mailing Address:

FEI Number: 73-1344590 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: ROGERS, STEVEN G
Address: 1000 ONE JACKSON PL., 188 E CAPITOL ST
City-St-Zip: JACKSON, MS

Title: VSD ( ) Delete
Name: FLATT, WILLIAM R
Address: 1000 ONE JACKSON PL., 188 E CAPITOL ST
City-St-Zip: JACKSON, MS

Title: CD ( ) Delete
Name: SPEED, LELAND R
Address: 1000 ONE JACKSON PL., 188 E CAPITOL ST
City-St-Zip: JACKSON, MS

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROGERS, STEVEN G
Address: 188 EAST CAPITOL STREET, SUITE 1000
City-St-Zip: JACKSON, MS 39201

Title: VSD (X) Change ( ) Addition
Name: COLLINS, JOSEPH M
Address: 188 EAST CAPITOL STREET, SUITE 1000
City-St-Zip: JACKSON, MS 39201

Title: CIO (X) Change ( ) Addition
Name: INGRAM, JAMES M
Address: 188 EAST CAPITOL STREET, SUITE 1000
City-St-Zip: JACKSON, MS 39201

Title: SVP ( ) Change (X) Addition
Name: POPE, MANDY M
Address: 188 EAST CAPITOL STREET, SUITE 1000
City-St-Zip: JACKSON, MS 39201

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: MANDY M. POPE SVP 04/30/2008

Electronic Signature of Signing Officer or Director — Date