FILED
Jun 20, 2003 8:00 am
Secretary of State
06-20-2003 90029 017 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

80127033

DOCUMENT # N01000004942

1. Entity Name
COLLEGIATE HOUSING PROPERTIES, INC.

Principal Place of Business	Mailing Address
11310 THONOTOSASSA ROAD THONOTOSASSA, FL 33592	11310 THONOTOSASSA ROAD THONOTOSASSA, FL 33592

2. Principal Place of Business	3. Mailing Address
12202 N. 22nd St.	12202 N. 22nd St.
Suite, Apt. #, etc. # 638	Suite, Apt. #, etc. # 638
City & State Tampa, Florida	City & State Tampa, Florida
Zip: 33612 Country: USA	Zip: 33612 Country: USA

[redacted]

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number: 59-3733469 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GATCHELL, DAVID A 11310 THONOTOSASSA ROAD THONOTOSASSA, FL 33592	Name: David A. Gatchell Street Address (P.O. Box Number is Not Acceptable) 12202 N. 22nd St. # 638 City: Tampa FL Zip Code: 33612

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: D Gatchell 6/18/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST MCWHIRTER, CAMILLE A 11310 THONOTOSASSA ROAD THONOTOSASSA, FL 33592	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV FISHER, BEN E 720 BRIGHTWATERS BLVD. SAINT PETERSBURG, FL 33704	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1233 Eden Isle Dr. N.E. St. Petersburg, FL 33704	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GATCHELL, DAVID A 11310 THONOTOSASSA ROAD THONOTOSASSA, FL 33592	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P 12202 N. 22nd St. # 638 Tampa, FL 33612	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: D Gatchell 6/18/03 (813)631-5100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #