

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P04330 (7)

1. Corporation Name:

SIXTH INCOME PROPERTIES FUND, INC.

95 MAY -1 PM 2:25

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:

Mailing Address:

**% TAX DEPT. 9TH FLOOR
1000 HARBOR BOULEVARD
WEEHAWKEN NJ 07087**

**% TAX DEPT. 9TH FLOOR
1000 HARBOR BOULEVARD
WEEHAWKEN NJ 07087**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/13/1984

3a. Date of Last Report
05/01/1994

4. FEI Number
13-3217938

Applied For
Not Applicable

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

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

7. Does corporation have delinquent tax obligations for periods ending on or before 12/31/94?
Florida Statutes ☐ Yes ☒ No

2. Principal Name of Officers:

2a. Mailing Address:

21. Name: Apt. # etc.

26. Name: Apt. # etc.

22. City & State:

27. City & State:

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

B1. Name:

B2. Street Address (P.O. Box Number is Not Acceptable)

B3.

B4. City:

FL

B5. Zip Code:

11. Pursuant to the provisions of Sections 601, 602 and 603, 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 provisions of Sections 601 through 603, Florida Statutes.

SIGNATURE:

Signature of Registered Agent or Registered Agent in Charge

Signature of New Registered Agent or Registered Agent in Charge

Date:

12. OFFICERS AND DIRECTORS:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

FILE **V**
NAME **PEZZULICH, PETER**
STREET ADDRESS **1000 HARBOR BLVD.**
CITY **WEEHAWKEN NJ**

FILE **S**
NAME **HAUGHEY, DOROTHY F.**
STREET ADDRESS **1000 HARBOR BLVD.**
CITY **WEEHAWKEN NJ**

FILE **SV**
NAME **SNYDER, JAMES A.**
STREET ADDRESS **1000 HARBOR BLVD.**
CITY **WEEHAWKEN NJ**

FILE **SV**
NAME **SUMMERS, EDWIN L.**
STREET ADDRESS **1000 HARBOR BLVD.**
CITY **WEEHAWKEN NJ**

FILE **D**
NAME **PRATT, ALBERT**
STREET ADDRESS **1000 HARBOR BLVD.**
CITY **WEEHAWKEN NJ**

FILE **D**
NAME **PROCTOR, SALLY**
STREET ADDRESS **1000 HARBOR BLVD.**
CITY **WEEHAWKEN NJ**

FILE **Vice President** ☒ Change ☐ Addition
NAME **Arnold, Walker**
STREET ADDRESS **1000 Harbor Blvd**
CITY **Weehawken, NJ**

FILE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY

FILE **President** ☒ Change ☐ Addition
NAME **Cohen, Lawrence A.**
STREET ADDRESS **1000 Harbor Blvd**
CITY **Weehawken, NJ**

FILE **Asst Treasurer** ☒ Change ☐ Addition
NAME **DeVito, Louis**
STREET ADDRESS **1000 Harbor Blvd**
CITY **Weehawken, NJ**

FILE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY

FILE **Director** ☒ Change ☐ Addition
NAME **Bull, Clive D**
STREET ADDRESS **1000 Harbor Blvd**
CITY **Weehawken, NJ**

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Sections 601 through 603, Florida Statutes. I further certify that the information provided on this annual report or biennial 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 and that I am authorized to execute this report as required by Chapter 601, Florida Statutes, and that my name appears on the list of officers and directors furnished with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR