2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P11831

1. Entity Name

FOGELMAN PROPERTIES, INC.



FILED Apr 20, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

5400 POPLAR AVENUE MEMPHIS, TN 38119

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DO NOT WRITE IN THIS SPACE

04102006 No Chg-P

P CR2E034 (11/05)

FEI Number
 62-1248661

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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 Ine above 	hamed entity submits this stateme	nt for the purpose of changing its registers	ed office or registered agent, or both, in	i the State of Florida. 1	am familiar with, and accept
the obligat	ions of registered agent.				

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000520490 05/02/06-80096-020 150.00

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOGELMAN, AVRON B.
HILE NAME STREET ADDRESS CITY-ST-ZIP	S JACKSON, KEVIN Q 5400 POPLAR AVE MEMPHIS, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP RANDLES, JOHN A. III 5400 POPLAR AVENUE MEMPHIS, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FOGELMAN, RICHARD L 5400 POPLAR AVE MEMPHIS, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAKER, STANLEY F 6791 NESHOBA MEMPHIS, TN
NAME STREET ADDRESS CITY-ST-ZIP	VP FOGELMAN, MARK 5400 POPLAR MEMPHIS, TN 38119 certify that the information supplied with this filing does not qualify for the ex-

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12. Thereby certify that the information supplied with this filling 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 trustee 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 with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRIVED NAME OF SIGNING OFFICER OR DI

John A. Bardles, I

4/10/04

901-767-6500

te

Daytime Phone #