

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P38732

1. Entity Name

TRANSCONTINENTAL REALTY INVESTORS, INC.

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90027 026 \*\*\*150.00

Principal Place of Business Mailing Address  
10670 NORTH CENTRAL EXPRESSWAY, SUITE 600 10670 NORTH CENTRAL EXPRESSWAY, SUITE 600  
DALLAS TX 75231 DALLAS TX 75231-2111

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 94-6565852

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME PAULSON, RANDALL M  
STREET ADDRESS 10670 N CENTRAL EXPWY SUITE 600  
CITY-ST-ZIP DALLAS TX ☒ Delete

TITLE  
NAME Blaha, Karl C  
STREET ADDRESS 10670 N Central Exp.  
CITY-ST-ZIP Dallas, TX 75231 ☒ Change ☐ Addition

TITLE  
NAME EVPS  
STREET ADDRESS HOLLAND, THOMAS A  
CITY-ST-ZIP 10670 N CENTRAL EXPWY SUITE 600  
DALLAS TX ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME WHITE, MARTIN L  
STREET ADDRESS 8051 COACH DRIVE  
CITY-ST-ZIP OAKLAND CA ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME ZAMPA, EDWARD G  
STREET ADDRESS #50 OSGOOD PL #110  
CITY-ST-ZIP SAN FRANCISCO CA ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP  
NAME WALDMAN, ROBERT A  
STREET ADDRESS 10670 N CENTRAL EXPRESSWAY, SUITE 600  
CITY-ST-ZIP DALLAS TX ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T  
NAME POTERA, DREW D  
STREET ADDRESS 10670 N CENTRAL EXPRESSWAY, SUITE 600  
CITY-ST-ZIP DALLAS TX ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Robert A. Waldman

4-10-00 214-692-4700

CR2E034 19/33