

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P38732

1. Entity Name

TRANSCONTINENTAL REALTY INVESTORS, INC.

FILED
Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90152 019 ***150.00

Principal Place of Business

10670 N CENTRAL EXP
SUITE 600
DALLAS TX 75231

Mailing Address

10670 N CENTRAL EXP
SUITE 600
DALLAS TX 75231

2. Principal Place of Business

1800 Valley View Lane

3. Mailing Address

1800 Valley View Lane

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

City & State

Dallas, Texas

City & State

Dallas, Texas

Zip

75234

Country

USA

Zip

75234

Country

USA

4. FEI Number

94-6565852

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

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, 2001 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	<input type="checkbox"/> Delete
NAME	BLAHA, KARL L	
STREET ADDRESS	10670 N CENTRAL EXP	
CITY-ST-ZIP	DALLAS TX 75231	
TITLE	EVPS	<input checked="" type="checkbox"/> Delete
NAME	HOLLAND, THOMAS A	
STREET ADDRESS	10670 N CENTRAL EXPWY SUITE 600	
CITY-ST-ZIP	DALLAS TX	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHITE, MARTIN L	
STREET ADDRESS	8051 COACH DRIVE	
CITY-ST-ZIP	OAKLAND CA	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZAMPA, EDWARD G	
STREET ADDRESS	#50 OSGOOD PL #110	
CITY-ST-ZIP	SAN FRANCISCO CA	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WALDMAN, ROBERT A	
STREET ADDRESS	10670 N CENTRAL EXPRESSWAY, SUITE 600	
CITY-ST-ZIP	DALLAS TX	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1800 Valley View Lane, Suite 300	
CITY-ST-ZIP	Dallas, Texas 75234	
TITLE	CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark W. Branigan	
STREET ADDRESS	1800 Valley View Lane, Suite 300	
CITY-ST-ZIP	Dallas, Texas 75234	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1800 Valley View Lane, Suite 300	
CITY-ST-ZIP	Dallas, Texas 75234	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 #

CR2E034 (10/00)