2002 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 24, 2002 8:00 am Secretary of State **DOCUMENT #** P38732 1. Entity Name 04-24-2002 90381 023 ***150 TRANSCONTINENTAL REALTY INVESTORS, INC. Principal Place of Business Mailing Address 1800 VALLEY VIEW LANE 1800 VALLEY VIEW LANE STE 300 STE 300 DALLAS TX 75234 DALLAS TX 75234 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 94-6565852 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Addition ☐ Change NAME BLAHA, KARL L NAME Kimbrough STREET ADDRESS 10670 N CENTRAL EXP STREET ADDRESS 1800 Valley View CITY-ST-ZIF CITY-ST-7IP Dallas TX 75231 <u>Dallas/IX</u> TITLE Delete TITLE Change Addition NAME David W. Starbuicz HOLLAND, THOMAS A NAME 1800 Valley STREET ADDRESS STREET ADDRESS 10670 N CENTRAL EXPWY SUITE 600 Views CITY-ST-ZIP CITY-ST-ZIP Dallas, TX DALLAS TX 75234 Addition TITLE ☐ Delete TITI F Change NAME WHITE, MARTIN L STREET ADDRESS 8051 COACH DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OAKLAND CA <u>2011.0C</u> TITLE TITLE Delete ☐ Change Addition NAME ZAMPA, EDWARD G NAME Corna STREET ADDRESS #50 OSGOOD PL #110 STREET ADDRESS 1800 Valley CITY-ST-ZIP SAN FRANCISCO CA CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WALDMAN, ROBERT A NAME STREET ADDRESS 10670 N CENTRAL EXPRESSWAY, SUITE 600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of the powered.

SIGNATURE:

TE TIEUUNIEU SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Daytime Phone :

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