2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State
03-28-2001 90005 027 ***150.00

D459669

DOCUMENT # P41014

1. Entity Name
RTR PROPERTIES (DEL.) INC.

Principal Place of Business	Mailing Address
808 THIRD STREET SUITE C NEPTUNE BEACH FL 32233	808 THIRD STREET SUITE C NEPTUNE BEACH FL 32233

00029274

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	245 Peachtree Center Ave,NE
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite 2800
City & State	City & State Atlanta, GA
Zip / Country	Zip 30303-1227 / Country USA

4. FEI Number 13-3682140 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORP SERVICE, COMPANY
1201 HAYS ST
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name: Robert Rouleau
Street Address (P.O. Box Number is Not Acceptable): 808 Third Street
Suite C
City: Neptune Beach FL Zip Code: 32266

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] Robert Rouleau DATE 3/20/01
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 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	DPS ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ROULEAU, ROBERT T.	NAME	
STREET ADDRESS	5500 ROYALMOUNT AVE., SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	MONTREAL CA	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ROULEAU, ROBERT T.	NAME	
STREET ADDRESS	5500 ROYALMOUNT AVE., SUITE 200	STREET ADDRESS	
CITY-ST-ZIP	MONTREAL CA	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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 other like empowered.

SIGNATURE: [signature] FEB. 5, 2001 514-737-5432
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Robert T. Rouleau