

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P41014

1. Entity Name

RTR PROPERTIES (DEL.) INC.

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

0459669

00029274

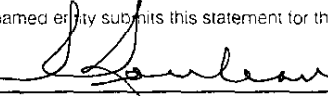


DO NOT WRITE IN THIS SPACE

Principal Place of Business 808 THIRD STREET SUITE C NEPTUNE BEACH FL 32233		Mailing Address 808 THIRD STREET SUITE C NEPTUNE BEACH FL 32233	
2. Principal Place of Business State, Apt. #, etc. City & State Zip		3. Mailing Address 245 Peachtree Center Ave, NE Suite 2800 City & State Atlanta, GA 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	
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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.

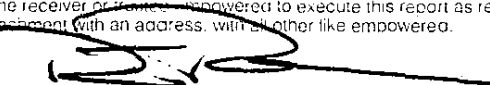
SIGNATURE  **Robert Rouleau** DATE **3/20/01**

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
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS ROULEAU, ROBERT T. 5500 ROYALMOUNT AVE., SUITE 200 MONTREAL CA ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROULEAU, ROBERT T. 5500 ROYALMOUNT AVE., SUITE 200 MONTREAL CA ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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:  **Robert T. Rouleau** **FEB. 5, 2001** **514-737-5432**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #