

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007297

Entity Name: EASTGROUP TRS, INC.

Current Principal Place of Business:

190 E. CAPITOL STREET
SUITE 400
JACKSON, MS 39201

Current Mailing Address:

190 E. CAPITOL STREET
SUITE 400
JACKSON, MS 39201

FEI Number: 64-0934059

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, CFO, SECRETARY, TREASURER,
DIRECTOR
Name MCKEY, N KEITH
Address 190 E. CAPITOL STREET, SUITE 400
City-State-Zip: JACKSON MS 39201

Title DIRECTOR
Name HOSTER, DAVID HII
Address 190 E. CAPITOL STREET, SUITE 400
City-State-Zip: JACKSON MS 39201

Title VP, ASST. SECRETARY
Name CORKERN, BRUCE
Address 190 E. CAPITOL STREET, SUITE 400
City-State-Zip: JACKSON MS 39201

Title PRESIDENT, CEO, DIRECTOR
Name LOEB, MARSHALL
Address 190 E. CAPITOL STREET
SUITE 400
City-State-Zip: JACKSON MS 39201

Title VP
Name WOOD, BRENT
Address 190 E. CAPITOL STREET
SUITE 400
City-State-Zip: JACKSON MS 39201

Title VP
Name COLEMAN, JOHN
Address 190 E. CAPITOL STREET
SUITE 400
City-State-Zip: JACKSON MS 39201

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: N KEITH MCKEY

CFO

02/28/2017

Electronic Signature of Signing Officer/Director Detail

Date