

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007297

Entity Name: EASTGROUP TRS, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

188 E. CAPITOL ST., 300 ONE JACKSON PL.
JACKSON, MS 39201

New Principal Place of Business:

190 E. CAPITOL STREET, SUITE 400
JACKSON, MS 39201

Current Mailing Address:

P. O. BOX 22728
JACKSON, MS 392252723

New Mailing Address:

190 E. CAPITOL STREET, SUITE 400
JACKSON, MS 39201

FEI Number: 64-0934059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: SPEED, LELAND R
Address: 188 E. CAPITOL ST., 300 ONE JACKSON PL.
City-St-Zip: JACKSON, MS 39201

Title: STCF () Delete
Name: MCKEY, N. KEITH
Address: 188 E. CAPITOL ST., 300 ONE JACKSON PL.
City-St-Zip: JACKSON, MS 39201

Title: PCEO () Delete
Name: HOSTER, DAVID H II
Address: 188 E. CAPITOL ST., 300 ONE JACKSON PL.
City-St-Zip: JACKSON, MS 39201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: SPEED, LELAND R
Address: 190 E. CAPITOL STREET, SUITE 400
City-St-Zip: JACKSON, MS 39201

Title: STCF (X) Change () Addition
Name: MCKEY, N. KEITH
Address: 190 E. CAPITOL STREET, SUITE 400
City-St-Zip: JACKSON, MS 39201

Title: PCEO (X) Change () Addition
Name: HOSTER, DAVID H II
Address: 190 E. CAPITOL STREET, SUITE 400
City-St-Zip: JACKSON, MS 39201

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: N. KEITH MCKEY

CFO

04/16/2009

Electronic Signature of Signing Officer or Director

Date