### **2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000003047

Entity Name: EASTGROUP PROPERTIES GENERAL PARTNERS, INC.

FILED
Mar 19, 2013
Secretary of State
CC1724536232

## **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: 72-1368282 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:

Date

### Officer/Director Detail:

Title PD Title VS

Electronic Signature of Registered Agent

Name HOSTER II, DAVID H Name MCKEY, N K

Address 190 E. CAPITOL STREET, SUITE 400 Address 190 E. CAPITOL STREET, SUITE 400

City-State-Zip: JACKSON MS 39201 City-State-Zip: JACKSON MS 39201

Title CD Title V

Name SPEED, LELAND R Name CORKERN, C. BRUCE

Address 190 E. CAPITOL STREET, SUITE 400 Address 190 E. CAPITOL STREET, SUITE 400

City-State-Zip: JACKSON MS 39201 City-State-Zip: JACKSON MS 39201

Title V Title V

Name PETSAS, WILLIAM D Name COLEMAN, JOHN F

Address 190 E. CAPITOL STREET, SUITE 400 Address 190 E. CAPITOL STREET, SUITE 400

City-State-Zip: JACKSON MS 39201 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 K MCKEY

CHIEF FINANCIAL OFFICER

03/19/2013