2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763611

FILED Apr 22, 2004 Secretary of State

Entity Name: GREATER TAMPA BAY CHAPTER NATIONAL ASSOCIATION OF INDUSTRIAL AND OFFICE PARKS,

INC

Current Principal Place of Business: New Principal Place of Business:

6107-B MEMORIAL HIGHWAY TAMPA, FL 33615 US

Current Mailing Address: New Mailing Address:

6107-B MEMORIAL HWY
TAMPA, FL 333615

6107-B MEMORIAL HWY
TAMPA, FL 33615

TAMPA, FL 33615

FEI Number: 59-2504370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GANG, NENA 6107-B MEMORIAL HWY TAMPA, FL 33615 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PPD () Delete (X) Change () Addition GARDNER, SCOTT MAGGI, JULIO Name: Name: 1601 S MAIN ST #308 Address: 235 3RD STREET #200 Address: City-St-Zip: TULSA, OK 74119 City-St-Zip: ST. PETERSBURG, FL 33701 Title: () Delete Title: () Change () Addition KRUEGER, ROBERT, Name: Name: Address: 6302 BENJAMIN RD 401 Address: City-St-Zip: TAMPA, FL City-St-Zip:

Title: PPD () Delete Title: () Change () Addition Name: MINCEY, DON Name:

Address: 13535 FEATHER SOUND DR Address: City-St-Zip: City-St-Zip:

Title: PPD () Delete Title: () Change () Addition

 Name:
 LAW, RHEA
 Name:

 Address:
 501 E KENNEDY BLVD #1700
 Address:

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:

Title: DT () Delete Title: () Change () Addition

 Name:
 SCHEAFNOCKER, CAROL,
 Name:

 Address:
 4921 MEMORIAL HWY #300
 Address:

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:

Title: ED () Delete Title: () Change () Addition

 Name:
 GANG, NENA
 Name:

 Address:
 4509 GEORGE RD.
 Address:

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NENA GANG ED 04/22/2004