DOCUMENT# - A04866 1. Entity Name TAMPA INTERSTATE PARTNERS, LTD.

Principal Place of Business

City & State

Zip

Mailing Address

City & State

Zip

180 WILSHIRE BOULEVARD CASSELBERRY FL 32707

180 WILSHIRE BOULEVARD CASSELBERRY FL 32707

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

FILED

02 SEP 26 AM 10: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA



	DUE	BY	SEP	TEMBER	25,	2002
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59-1683130

7. Name and Address of New Registered Agent

Applied For Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

Country

MORLEY, PATRICK M 180 WILSHIRE BOULEVARD CASSELBERRY FL 32707

Country

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number

City

Zip Code

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. I am familiar with, and accept

SIGNATURE -

Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record.

\$1,322,309,92

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12.	GENERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME	THOMPSON, HUGH JR.	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			0000081260200: 10/01/02-01028023
DOCUMENT # NAME	MORLEY, PATRICK M.	STREET ADDRESS	****526.25 ****526.25
STREET ADDRESS CITY-ST-ZIP	180 WILSHIRE BLVD CASSELBERRY FL 32707	CITY-ST-ZIP	
DOCUMENT # NAME	MCGRATTY, GERALD R.	STREET ADDRESS	
STREET ADDRESS C/TY-ST-ZIP	IRESS 104 LONGBRANCH ROAD	CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # Name		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	•
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620. Florida Statutes

SIGNATURE:

Daytime Phone #

FILED

02 SEP 25 AM 10: 55

SECRETARY OF STATE TALLAHASSEE. FLORIDA

September 24, 2002

Divisions of Corporations Florida Department of State P.O. Box 6327 Tallahassee, FL. 32314

Re: Tampa Interstate Partners, LTD.

Dear Customer Service Representative:

Enclosed please find our 2002 UBR filing along with the fee in the amount of \$526.25.

We did not receive the UBR form that was apparently mailed in January, so per your instructions, we have omitted the late fee from this filing.

Sincerely,

Kathleen Walters

Controller

First Capital Property Group, Inc.

As Agent for Tampa Interstate Partners, LTD.