

A94000001142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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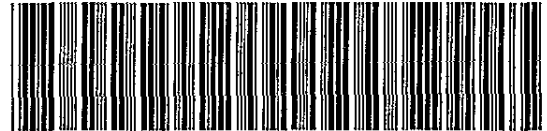
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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[Signature]

KANTER, MATTENSON, MORGAN & GORDON

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS
ATTORNEYS AT LAW

Writer's Direct Dial
312-715-0637 (Ext 224)

25 EAST WASHINGTON STREET, SUITE 1742, CHICAGO, IL 60602-1803

TELEPHONE: (312) 368-1400 FACSIMILE: (312) 715-0657 EMAIL: KMMG2@AOL.COM

March 15, 2003

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

RE: Limited Partnership Statement of Change of Registered Office or
Registered Agent, or Both for Tampa Capital Income Fund, Ltd.

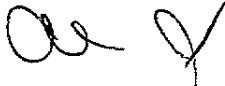
Dear Sir or Madam:

Enclosed please find for filing the Limited Partnership Statement of Change of
Registered Office or Registered Agent, or Both (in duplicate) along with a check for
\$35.00 to cover the filing fee.

If you have any questions, please contact the undersigned.

Sincerely,

KANTER, MATTENSON, MORGAN & GORDON



Alan J. Morgan

AJM;ke
Enc.

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03 MAR 21 AM 11:36
TALLAHASSEE, FL 32314

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Tampa Capital Income Fund, Ltd.
Name of the limited partnership

2. August 23, 1994
Date of filing/registration in Florida

3. A94000001142
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Barcap Realty Services Group, Inc.
Name
3570 US Hwy 98 N.
Address
Lakeland, FL 33809
City, State and Zip

5. The name and address of the new registered agent and/or office:

Mark L. Wilson
Name
4337 Ellinwood Blvd.
Florida street address (P.O. Box **not** acceptable)
Palm Harbor FL 34685
City, State and Zip

6. Such change(s) was/were authorized by the general partners.
FJBIT, Inc.

BY: Frederick J. Brizek
Signature of General Partner Frederick J. Brizek

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Mark Wilson
Signature of Registered Agent Mark Wilson

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**