

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F35814

1. Entity Name
TATUM PROPERTIES, INC.

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90110 028 ***150.00

Principal Place of Business 1921 FLINTSHIRE CT TITUSVILLE FL 32796	Mailing Address 1921 FLINTSHIRE CT TITUSVILLE FL 32796-1027
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 58-2258009	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**SHARP, SUSAN T
4460 CRUMPET CT
TITUSVILLE FL 32796**

7. Name and Address of New Registered Agent

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City _____ **FL** 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE PTD	<input type="checkbox"/> Delete
NAME TATUM, MAURICE G	
STREET ADDRESS 1921 FLINTSHIRE CT	
CITY-ST-ZIP TITUSVILLE FL	
TITLE VSD	<input type="checkbox"/> Delete
NAME TATUM, LAVETTA H	
STREET ADDRESS 1921 FLINTSHIRE CT	
CITY-ST-ZIP TITUSVILLE FL	
TITLE PTD	<input type="checkbox"/> Delete
NAME TATUM, MAURICE G.	
STREET ADDRESS 1921 FLINTSHIRE CT	
CITY-ST-ZIP TITUSVILLE FL	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maurice G. Tatum, Pres. *Maurice G. Tatum* 4/11/00 (321)269-3346
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)